



# ANNUAL STATEMENT

For the Year Ended December 31, 2013  
of the Condition and Affairs of the

## Harbor Health Plan, Inc.

NAIC Group Code.....4759, 4759 (Current Period) (Prior Period)	NAIC Company Code..... 11081	Employer's ID Number..... 38-3295207
Organized under the Laws of MI	State of Domicile or Port of Entry MI	Country of Domicile US
Licensed as Business Type.....HMO	Is HMO Federally Qualified? Yes [ X ] No [ ]	
Incorporated/Organized..... September 29, 1995	Commenced Business..... December 19, 2000	
Statutory Home Office	P.O. Box 441970..... Detroit ..... MI ..... US .... 48244-1970 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	4707 St. Antoine 5 South..... Detroit ..... MI ..... US .... 48201 (Street and Number) (City or Town, State, Country and Zip Code)	800-543-0161 (Area Code) (Telephone Number)
Mail Address	P.O. Box 441970..... Detroit ..... MI ..... US .... 48244-1970 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	4707 St. Antoine 5 South..... Detroit ..... MI ..... US .... 48201 (Street and Number) (City or Town, State, Country and Zip Code)	800-543-0161 (Area Code) (Telephone Number)
Internet Web Site Address	http://www.harborhealthplan.com/	
Statutory Statement Contact	Joyce Poole (Name) JPoole2@dmc.org (E-Mail Address)	313-966-9380 (Area Code) (Telephone Number) (Extension) 313-966-7770 (Fax Number)

### OFFICERS

Name	Title	Name	Title
1. Carrie Harris-Muller	President & CEO	2. Christopher Allen #	CFO
3. Thomas M. Ways	Senior Vice President	4. Gregory Berger	CMO & Medical Director

**OTHER**

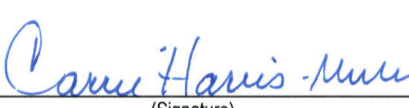
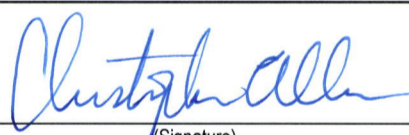
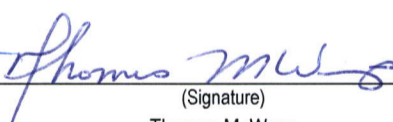
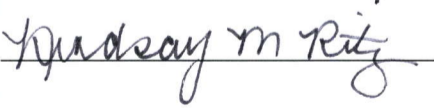
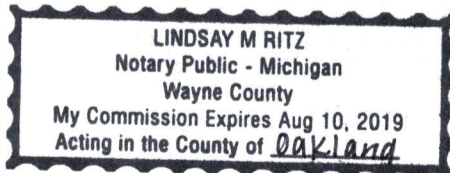
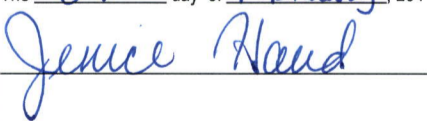
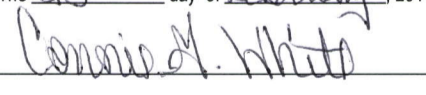
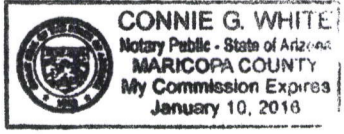
Ronald L. Rosenberger	Vice President	Elisa E. Harris	Vice President & Asst. Secretary
Deborah W. Larios	Vice President & Asst. Secretary	Paul Castanon #	Vice President Deputy General Counsel

### DIRECTORS OR TRUSTEES

Elisa E. Harris	Deborah W. Larios	Paul Castanon #	Claudia Austin #
Brenda Williams #			

State of.....  
County of.....

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

 (Signature) Carrie Harris-Muller 1. (Printed Name) President & CEO (Title)	 (Signature) Christopher Allen 2. (Printed Name) CFO (Title)	 (Signature) Thomas M. Ways 3. (Printed Name) Senior Vice President (Title)
Subscribed and sworn to before me The <u>21<sup>st</sup></u> day of <u>February</u> , 2014  	Subscribed and sworn to before me The <u>24<sup>th</sup></u> day of <u>February</u> , 2014  JENICE HAND NOTARY PUBLIC, STATE OF MI COUNTY OF WAYNE MY COMMISSION EXPIRES May 16, 2016 ACTING IN COUNTY OF <u>Wayne</u>	Subscribed and sworn to before me The <u>25<sup>th</sup></u> day of <u>February</u> , 2014  

a. Is this an original filing? Yes [ X ] No [ ]  
b. If no 1. State the amendment number \_\_\_\_\_  
2. Date filed \_\_\_\_\_  
3. Number of pages attached \_\_\_\_\_

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....			0	
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....5,924,171, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....516,487, Schedule DA).....	6,440,658		6,440,658	3,408,999
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	6,440,658	0	6,440,658	3,408,999
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	260		260	
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums.....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....	22,341		22,341	22,341
18.2 Net deferred tax asset.....	450,420	450,420	0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	10,192
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	1,522,706	1,522,706	0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	8,436,385	1,973,126	6,463,259	3,441,532
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	8,436,385	1,973,126	6,463,259	3,441,532

DETAILS OF WRITE-INS				
1101. ....			0	
1102. ....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. ....			0	
2502. ....			0	
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	1,470,960		1,470,960	1,139,527
2. Accrued medical incentive pool and bonus amounts.....			0	
3. Unpaid claims adjustment expenses.....	37,086		37,086	17,369
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....			0	
5. Aggregate life policy reserves.....			0	
6. Property/casualty unearned premium reserve.....			0	
7. Aggregate health claim reserves.....			0	
8. Premiums received in advance.....			0	
9. General expenses due or accrued.....	60,325		60,325	587,214
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized capital gains (losses)).....			0	.650
10.2 Net deferred tax liability.....			0	
11. Ceded reinsurance premiums payable.....	81,419		81,419	32,545
12. Amounts withheld or retained for the account of others.....			0	
13. Remittances and items not allocated.....	38,437		38,437	
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....			0	
15. Amounts due to parent, subsidiaries and affiliates.....	14,900		14,900	
16. Derivatives.....			0	
17. Payable for securities.....			0	
18. Payable for securities lending.....			0	
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized and \$.....0 certified reinsurers).....			0	
20. Reinsurance in unauthorized and certified (\$.....0) companies.....			0	
21. Net adjustments in assets and liabilities due to foreign exchange rates.....			0	
22. Liability for amounts held under uninsured plans.....			0	
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	0	0	0	0
24. Total liabilities (Lines 1 to 23).....	1,703,127	0	1,703,127	1,777,305
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	60,000	60,000
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX	6,953,557	2,953,557
29. Surplus notes.....	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	(2,253,425)	(1,349,330)
32. Less treasury stock at cost:				
32.1 .....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX		
32.2 .....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	4,760,132	1,664,227
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	6,463,259	3,441,532

DETAILS OF WRITE-INS

2301. ....			0	
2302. ....			0	
2303. ....			0	
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0	0	0
2501. ....	XXX	XXX		
2502. ....	XXX	XXX		
2503. ....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	0	0
3001. ....	XXX	XXX		
3002. ....	XXX	XXX		
3003. ....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months.....	XXX.....	28,909	25,714
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	8,910,616	7,931,304
3. Change in unearned premium reserves and reserve for rate credits.....	XXX.....		
4. Fee-for-service (net of \$.....0 medical expenses).....	XXX.....		
5. Risk revenue.....	XXX.....		
6. Aggregate write-ins for other health care related revenues.....	XXX.....	0	51,431
7. Aggregate write-ins for other non-health revenues.....	XXX.....	0	0
8. Total revenues (Lines 2 to 7).....	XXX.....	8,910,616	7,982,735
Hospital and Medical:			
9. Hospital/medical benefits.....		6,473,379	3,654,141
10. Other professional services.....		375,109	385,970
11. Outside referrals.....			
12. Emergency room and out-of-area.....		44,125	332,501
13. Prescription drugs.....		612,367	588,657
14. Aggregate write-ins for other hospital and medical.....0		0	0
15. Incentive pool, withhold adjustments and bonus amounts.....		47,598	93,135
16. Subtotal (Lines 9 to 15).....	0	7,552,578	5,054,404
Less:			
17. Net reinsurance recoveries.....			
18. Total hospital and medical (Lines 16 minus 17).....0		7,552,578	5,054,404
19. Non-health claims (net).....			
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....		463,816	157,909
21. General administrative expenses.....		935,286	2,830,331
22. Increase in reserves for life and accident and health contracts including \$.....0 increase in reserves for life only).....			
23. Total underwriting deductions (Lines 18 through 22).....0		8,951,680	8,042,644
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(41,064)	(59,909)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....		(232,952)	(6,632)
26. Net realized capital gains or (losses) less capital gains tax of \$.....0.....		6,505	
27. Net investment gains or (losses) (Lines 25 plus 26).....0		(226,447)	(6,632)
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)].....			
29. Aggregate write-ins for other income or expenses.....0		0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX.....	(267,511)	(66,541)
31. Federal and foreign income taxes incurred.....	XXX.....		
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	(267,511)	(66,541)

DETAILS OF WRITE-INS			
0601. Experience Rating Credit.....	XXX.....		51,431
0602. ....	XXX.....		
0603. ....	XXX.....		
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX.....	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	XXX.....	0	51,431
0701. ....	XXX.....		
0702. ....	XXX.....		
0703. ....	XXX.....		
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX.....	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above).....	XXX.....	0	0
1401. ....			
1402. ....			
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page.....0		0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....0		0	0
2901. ....			
2902. ....			
2903. ....			
2998. Summary of remaining write-ins for Line 29 from overflow page.....0		0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....0		0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year	2 Prior Year
33. Capital and surplus prior reporting period.....	1,664,226	1,826,655
34. Net income or (loss) from Line 32.....	(267,511)	(66,541)
35. Change in valuation basis of aggregate policy and claim reserves.....		
36. Change in net unrealized capital gains and (losses) less capital gains tax of \$.....0.....		
37. Change in net unrealized foreign exchange capital gain or (loss).....		
38. Change in net deferred income tax.....	105,081	331,855
39. Change in nonadmitted assets.....	(741,664)	(506,732)
40. Change in unauthorized and certified reinsurance.....		
41. Change in treasury stock.....		
42. Change in surplus notes.....		
43. Cumulative effect of changes in accounting principles.....		
44. Capital changes:		
44.1 Paid in.....		
44.2 Transferred from surplus (Stock Dividend).....		
44.3 Transferred to surplus.....		
45. Surplus adjustments:		
45.1 Paid in.....	4,000,000	
45.2 Transferred to capital (Stock Dividend).....		
45.3 Transferred from capital.....		
46. Dividends to stockholders.....		
47. Aggregate write-ins for gains or (losses) in surplus.....	0	78,989
48. Net change in capital and surplus (Lines 34 to 47).....	3,095,906	(162,429)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	4,760,132	1,664,226

DETAILS OF WRITE-INS

4701. ....		
4702. Reversal of prior year tax expense.....		78,989
4703. ....		
4798. Summary of remaining write-ins for Line 47 from overflow page.....	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above).....	0	78,989

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	8,959,490	7,963,849
2. Net investment income.....	(233,212)	(6,632)
3. Miscellaneous income.....		51,431
4. Total (Lines 1 through 3).....	8,726,278	8,008,648
5. Benefit and loss related payments.....	7,221,145	5,826,363
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	1,906,274	2,736,350
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	650	
10. Total (Lines 5 through 9).....	9,128,069	8,562,713
11. Net cash from operations (Line 4 minus Line 10).....	(401,791)	(554,065)
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....		
12.2 Stocks.....		
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	0	0
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....		
13.2 Stocks.....		
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	0
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	0	0
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....	4,000,000	
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	(566,550)	(105,438)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	3,433,450	(105,438)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	3,031,659	(659,503)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	3,408,998	4,068,501
19.2 End of year (Line 18 plus Line 19.1).....	6,440,657	3,408,998

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001 .....	.....	.....
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## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
		Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plans	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
	Total									
1. Net premium income.....	8,910,616							8,910,616		
2. Change in unearned premium reserves and reserve for rate credit.....	0									
3. Fee-for-service (net of \$.....0 medical expenses).....	0									XXX
4. Risk revenue.....	0									XXX
5. Aggregate write-ins for other health care related revenues.....	0	0	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6).....	8,910,616	0	0	0	0	0	0	8,910,616	0	0
8. Hospital/medical benefits.....	6,473,379							6,473,379		XXX
9. Other professional services.....	375,109							375,109		XXX
10. Outside referrals.....	0									XXX
11. Emergency room and out-of-area.....	44,125							44,125		XXX
12. Prescription drugs.....	612,367							612,367		XXX
13. Aggregate write-ins for other hospital and medical.....	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts.....	47,598							47,598		XXX
15. Subtotal (Lines 8 to 14).....	7,552,578	0	0	0	0	0	0	7,552,578	0	XXX
16. Net reinsurance recoveries.....	0									XXX
17. Total hospital and medical (Lines 15 minus 16).....	7,552,578	0	0	0	0	0	0	7,552,578	0	XXX
18. Non-health claims (net).....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$.....0 cost containment expenses.....	463,816							463,816		
20. General administrative expenses.....	935,286							935,286		
21. Increase in reserves for accident and health contracts.....	0									XXX
22. Increase in reserve for life contracts.....	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22).....	8,951,680	0	0	0	0	0	0	8,951,680	0	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23).....	(41,064)	0	0	0	0	0	0	(41,064)	0	0

### DETAILS OF WRITE-INS

[illegible]

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

		1	2	3	4
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1.	Comprehensive (hospital and medical).....				0
2.	Medicare supplement.....				0
3.	Dental only.....				0
4.	Vision only.....				0
5.	Federal employees health benefits plan.....				0
6.	Title XVIII - Medicare.....				0
7.	Title XIX - Medicaid.....	8,986,097		75,481	8,910,616
8.	Other health.....				0
9.	Health subtotal (Lines 1 through 8).....	8,986,097	0	75,481	8,910,616
10.	Life.....				0
11.	Property/casualty.....				0
12.	Totals (Lines 9 to 11).....	8,986,097	0	75,481	8,910,616

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct.....	7,173,548							7,173,548		
1.2 Reinsurance assumed.....	0									
1.3 Reinsurance ceded.....	0									
1.4 Net.....	7,173,548	0	0	0	0	0	0	7,173,548	0	0
2. Paid medical incentive pools and bonuses.....	47,598							47,598		
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct.....	1,470,960							1,470,960		
3.2 Reinsurance assumed.....	0									
3.3 Reinsurance ceded.....	0									
3.4 Net.....	1,470,960	0	0	0	0	0	0	1,470,960	0	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct.....	0									
4.2 Reinsurance assumed.....	0									
4.3 Reinsurance ceded.....	0									
4.4 Net.....	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year.....	0									
6. Net healthcare receivables (a).....	0									
7. Amounts recoverable from reinsurers December 31, current year.....	0									
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct.....	1,139,527							1,139,527		
8.2 Reinsurance assumed.....	0									
8.3 Reinsurance ceded.....	0									
8.4 Net.....	1,139,527	0	0	0	0	0	0	1,139,527	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct.....	0									
9.2 Reinsurance assumed.....	0									
9.3 Reinsurance ceded.....	0									
9.4 Net.....	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year.....	0									
11. Amounts recoverable from reinsurers December 31, prior year.....	0									
12. Incurred benefits:										
12.1 Direct.....	7,504,981	0	0	0	0	0	0	7,504,981	0	0
12.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
12.4 Net.....	7,504,981	0	0	0	0	0	0	7,504,981	0	0
13. Incurred medical incentive pools and bonuses.....	47,598	0	0	0	0	0	0	47,598	0	0

(a) Excludes \$.00 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Medical and Hospital)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in process of adjustment:										
1.1 Direct.....	465,350							465,350		
1.2 Reinsurance assumed.....	0									
1.3 Reinsurance ceded.....	0									
1.4 Net.....	465,350	0	0	0	0	0	0	465,350	0	0
2. Incurred but unreported:										
2.1 Direct.....	1,005,610							1,005,610		
2.2 Reinsurance assumed.....	0									
2.3 Reinsurance ceded.....	0									
2.4 Net.....	1,005,610	0	0	0	0	0	0	1,005,610	0	0
3. Amounts withheld from paid claims and capitations:										
3.1 Direct.....	0									
3.2 Reinsurance assumed.....	0									
3.3 Reinsurance ceded.....	0									
3.4 Net.....	0	0	0	0	0	0	0	0	0	0
4. Totals:										
4.1 Direct.....	1,470,960	0	0	0	0	0	0	1,470,960	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	1,470,960	0	0	0	0	0	0	1,470,960	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical).....					0	
2. Medicare supplement.....					0	
3. Dental only.....					0	
4. Vision only.....					0	
5. Federal employees health benefits plan.....					0	
6. Title XVIII - Medicare.....					0	
7. Title XIX - Medicaid.....	869,639	6,303,907	10,700	1,460,260	880,339	1,139,527
8. Other health.....					0	
9. Health subtotal (Lines 1 to 8).....	869,639	6,303,907	10,700	1,460,260	880,339	1,139,527
10. Healthcare receivables (a).....					0	
11. Other non-health.....					0	
12. Medical incentive pools and bonus amounts.....	47,598				47,598	
13. Totals (Lines 9 - 10 + 11 + 12).....	917,237	6,303,907	10,700	1,460,260	927,937	1,139,527

(a) Excludes \$.....0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior.....	(432)	.84	(652)	(652)	
2. 2009.....	1,915	3,023	.19		
3. 2010.....	.XXX		.644		
4. 2011.....	.XXX	.XXX	3,771		
5. 2012.....	.XXX	.XXX	.XXX	5,826	
6. 2013.....	.XXX	.XXX	.XXX	.XXX	7,221

SECTION B - INCURRED HEALTH CLAIMS - GRAND TOTAL

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior.....	(432)	.84	(652)	(652)	
2. 2009.....	2,246	.735	.19		
3. 2010.....	.XXX	3,023	.644		
4. 2011.....	.XXX	.XXX	3,771		
5. 2012.....	.XXX	.XXX	.XXX	5,054	
6. 2013.....	.XXX	.XXX	.XXX	.XXX	7,553

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - GRAND TOTAL

Years in Which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claim Payments	3  Claim Adjustment Expense Payments	4  Percent (Col. 3/2)	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  Percent (Col. 5/1)	7  Claims Unpaid	8  Unpaid Claim Adjustment Expense	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	10  Percent (Col. 9/1)
1. 2009.....	4,419			0.0	0	0.0			0	0.0
2. 2010.....	6,598			0.0	0	0.0			0	0.0
3. 2011.....	7,499			0.0	0	0.0			0	0.0
4. 2012.....	7,931			0.0	0	0.0			0	0.0
5. 2013.....	8,911	7,221	464	6.4	7,685	86.2	1,471	37	9,193	103.2

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Hospital & Medical  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Hospital & Medical  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Hospital & Medical  
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare Supp.  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare Supp.  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare Supp.  
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Dental  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Dental  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Dental  
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Vision  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Vision  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Vision  
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Fed Emp Health  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Fed Emp Health  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Fed Emp Health  
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare  
NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior.....	.....(432)	......84	.....(652)	.....(652)	.....
2. 2009.....	.....1,915	.....3,023	......19	.....	.....
3. 2010.....	.....XXX	.....	.....644	.....	.....
4. 2011.....	.....XXX	.....XXX	.....3,771	.....	.....
5. 2012.....	.....XXX	.....XXX	.....XXX	.....5,826	.....
6. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....7,221

SECTION B - INCURRED HEALTH CLAIMS - TITLE XIX - MEDICAID

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior.....	.....(432)	......84	.....(652)	.....(652)	.....
2. 2009.....	.....2,246	.....735	......19	.....	.....
3. 2010.....	.....XXX	.....3,023	.....644	.....	.....
4. 2011.....	.....XXX	.....XXX	.....3,771	.....	.....
5. 2012.....	.....XXX	.....XXX	.....XXX	.....5,054	.....
6. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....7,553

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XIX - MEDICAID

Years in Which Premiums were Earned and Claims were Incurred	1  Premiums Earned	2  Claim Payments	3  Claim Adjustment Expense Payments	4  Percent (Col. 3/2)	5  Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6  Percent (Col. 5/1)	7  Claims Unpaid	8  Unpaid Claim Adjustment Expenses	9  Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8)	10  Percent (Col. 9/1)
1. 2009.....	.....4,419	.....	.....	.....0.0	......0	.....0.0	.....	.....	......0	.....0.0
2. 2010.....	.....6,598	.....	.....	.....0.0	......0	.....0.0	.....	.....	......0	.....0.0
3. 2011.....	.....7,499	.....	.....	.....0.0	......0	.....0.0	.....	.....	......0	.....0.0
4. 2012.....	.....7,931	.....	.....	.....0.0	......0	.....0.0	.....	.....	......0	.....0.0
5. 2013.....	.....8,911	.....7,221	.....464	.....6.4	.....7,685	.....86.2	.....1,471	.....37	.....9,193	.....103.2

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Other  
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Other  
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Other  
NONE**

**U & I Ex.-Pt.2D  
NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$.....0 for occupancy of own building).....					.....0
2. Salaries, wages and other benefits.....					.....0
3. Commissions (less \$.....0 ceded plus \$.....0 assumed).....					.....0
4. Legal fees and expenses.....			(596)		(596)
5. Certifications and accreditation fees.....					.....0
6. Auditing, actuarial and other consulting services.....			68,258		68,258
7. Traveling expenses.....			1,676		1,676
8. Marketing and advertising.....			525		525
9. Postage, express and telephone.....			2,281		2,281
10. Printing and office supplies.....			692		692
11. Occupancy, depreciation and amortization.....			10,192		10,192
12. Equipment.....					.....0
13. Cost or depreciation of EDP equipment and software.....			28,837		28,837
14. Outsourced services including EDP, claims, and other services.....		463,816			463,816
15. Boards, bureaus and association fees.....			645		645
16. Insurance, except on real estate.....			4,216		4,216
17. Collection and bank service charges.....				5,948	5,948
18. Group service and administration fees.....					.....0
19. Reimbursements by uninsured plans.....					.....0
20. Reimbursements from fiscal intermediaries.....					.....0
21. Real estate expenses.....					.....0
22. Real estate taxes.....					.....0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....					.....0
23.2 State premium taxes.....					.....0
23.3 Regulatory authority licenses and fees.....			13,753		13,753
23.4 Payroll taxes.....					.....0
23.5 Other (excluding federal income and real estate taxes).....			28,247		28,247
24. Investment expenses not included elsewhere.....				227,322	227,322
25. Aggregate write-ins for expenses.....	0	0	776,560	0	776,560
26. Total expenses incurred (Lines 1 to 25).....	0	463,816	935,286	233,270	(a).....1,632,372
27. Less expenses unpaid December 31, current year.....		37,086	60,325		97,411
28. Add expenses unpaid December 31, prior year.....		17,369	587,215		604,584
29. Amounts receivable relating to uninsured plans, prior year.....					.....0
30. Amounts receivable relating to uninsured plans, current year.....					.....0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....	0	444,099	1,462,176	233,270	2,139,545

DETAILS OF WRITE-INS

2501. Intercompany Management Fees.....			602,997		602,997
2502. Miscellaneous Expenses.....			173,563		173,563
2503. ....					.....0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0	0
2599. TOTALS (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	776,560	0	776,560

(a) Includes management fees of \$.....602,997 to affiliates and \$.....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds.....	(a).....	.....
1.1	Bonds exempt from U.S. tax.....	(a).....	.....
1.2	Other bonds (unaffiliated).....	(a).....	.....
1.3	Bonds of affiliates.....	(a).....	.....
2.1	Preferred stocks (unaffiliated).....	(b).....	.....
2.11	Preferred stocks of affiliates.....	(b).....	.....
2.2	Common stocks (unaffiliated).....	.....	.....
2.21	Common stocks of affiliates.....	.....	.....
3.	Mortgage loans.....	(c).....	.....
4.	Real estate.....	(d).....	.....
5.	Contract loans.....	.....	.....
6.	Cash, cash equivalents and short-term investments.....	(e).....58	.....318
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....	.....
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....58	.....318
11.	Investment expenses.....	(g).....233,270	
12.	Investment taxes, licenses and fees, excluding federal income taxes.....	(g).....	
13.	Interest expense.....	(h).....	
14.	Depreciation on real estate and other invested assets.....	(i).....0	
15.	Aggregate write-ins for deductions from investment income.....	.....0	
16.	Total deductions (Lines 11 through 15).....	.....233,270	
17.	Net investment income (Line 10 minus Line 16).....	.....(232,952)	

DETAILS OF WRITE-INS

0901.	.....	.....	.....
0902.	.....	.....	.....
0903.	.....	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.	.....	.....	
1502.	.....	.....	
1503.	.....	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page.....	.....0	
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....0	
(a)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(b)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.		
(c)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(d)	Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.		
(e)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(f)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium.		
(g)	Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.		
(h)	Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.		
(i)	Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....	.....	.....0	.....	.....
1.1	Bonds exempt from U.S. tax.....	.....	.....0	.....	.....
1.2	Other bonds (unaffiliated).....	.....	.....0	.....	.....
1.3	Bonds of affiliates.....	.....	.....0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....	.....0	.....	.....
2.11	Preferred stocks of affiliates.....	.....	.....0	.....	.....
2.2	Common stocks (unaffiliated).....	.....	.....0	.....	.....
2.21	Common stocks of affiliates.....	.....	.....0	.....	.....
3.	Mortgage loans.....	.....	.....0	.....	.....
4.	Real estate.....	.....	.....0	.....	.....
5.	Contract loans.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments.....	.....	.....0	.....	.....
7.	Derivative instruments.....	.....	.....0	.....	.....
8.	Other invested assets.....	.....	.....0	.....	.....
9.	Aggregate write-ins for capital gains (losses).....	.....6,505	.....0	.....6,505	.....0
10.	Total capital gains (losses).....	.....6,505	.....0	.....6,505	.....0

DETAILS OF WRITE-INS

0901.	Delivery Van.....	.....6,505	.....	.....6,505	.....	.....
0902.	.....	.....	.....	.....0	.....	.....
0903.	.....	.....	.....	.....0	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....6,505	.....0	.....6,505	.....0	.....0

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....	450,420	331,855	(118,565)
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....		14,495	14,495
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....	1,522,706	865,680	(657,026)
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other than invested assets.....	0	19,432	19,432
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	1,973,126	1,231,462	(741,664)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	1,973,126	1,231,462	(741,664)

DETAILS OF WRITE-INS

1101. ....			0
1102. ....			0
1103. ....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Prepaid expenses.....		19,432	19,432
2502. ....			0
2503. ....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	19,432	19,432

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health maintenance organizations.....	2,121	2,183	2,401	2,646	2,682	28,909
2. Provider service organizations.....						
3. Preferred provider organizations.....						
4. Point of service.....						
5. Indemnity only.....						
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total.....	2,121	2,183	2,401	2,646	2,682	28,909

DETAILS OF WRITE-INS

0601. ....						
0602. ....						
0603. ....						
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected During the Year		Heath Care Receivables Accrued as of December 31 of Current Year		5	6
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year	Health Care Receivables in Prior Years (Columns 1 + 3)	Estimated Health Care Receivables Accrued as of December 31 of Prior Year
1. Pharmaceutical rebate receivables.....					.....0	
2. Claim overpayment receivables.....					.....0	
3. Loans and advances to providers.....					.....0	
4. Capitation arrangement receivables.....					.....0	
5. Risk sharing receivables.....					.....0	
6. Other health care receivables.....					.....0	
7. Totals (Lines 1 through 6).....	.....0	.....0	.....0	.....0	.....0	.....0

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

NOTES TO FINANCIAL STATEMENTS

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Accounting Practices

The financial statements of Harbor Health Plan, Inc. are presented on the basis of accounting practices prescribed or permitted by the Michigan Insurance Department.

The Michigan Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Michigan for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Michigan Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Michigan.

The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Michigan is shown below:

	State of Domicile	2013	2012
<b>NET INCOME</b>			
(1) Harbor Health Plan, Inc. state basis (Page 4, Line 32, Columns 2 & 3)	MI	(267,511)	(66,541)
(2) State Prescribed Practices that increase/(decrease) NAIC SAP			
(3) State Permitted Practices that increase/(decrease) NAIC SAP			
(4) NAIC SAP (1 – 2 – 3 = 4)	MI	(267,511)	(66,541)
<b>SURPLUS</b>			
(5) Harbor Health Plan, Inc. state basis (Page 3, line 33, Columns 3 & 4)	MI	4,760,132	1,664,227
(6) State Prescribed Practices that increase/(decrease) NAIC SAP			
(7) State Permitted Practices that increase/(decrease) NAIC SAP			
(8) NAIC SAP (5 – 6 – 7 = 8)	MI	4,760,132	1,664,227

B. Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. Actual results could differ from those estimates.

C. Accounting Policy

Life Premiums are recognized as income when received and a policy reserve for future benefits is established. Health premiums are earned ratably over the terms of the related contracts or policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

In addition, the company uses the following accounting policies:

- (2) Short-term investments are stated at amortized cost.
- (3) Bonds not backed by other loans are stated at amortized cost.
- (4) Common Stocks at market except that investments in stocks of uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
- (5) Preferred stocks are stated in accordance with the guidance provided in SSAP No 32.
- (6) Mortgage loans on real estate are stated at the aggregate carrying value less accrued interest.
- (7) Loan-backed securities are stated at amortized cost.
- (8) The Company owns no investments in subsidiaries.
- (9) The Company has no ownership interests in joint ventures.
- (10) The Company has no derivative investments.
- (11) The Company is not subject to any premium deficiency reserve requirements.
- (12) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (13) The Company has not modified its capitalization policy from the prior period.
- (14) The Company has no pharmaceutical rebate receivables.

NOTE 2 – ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

- A. During the current year's financial statement preparation, the Company discovered no material errors for prior years.

NOTES TO FINANCIAL STATEMENTS

NOTE 3 – BUSINESS COMBINATIONS AND GOODWILL

- A. Statutory Purchase Method – The Company has no unamortized goodwill resulting from a statutory purchase
- B. Merger - The Company was not party to a merger during the year.
- C. Assumption Reinsurance – The Company has no unamortized goodwill resulting from assumption reinsurance.
- D. Impairment Loss - The Company did not recognize an impairment loss on the transactions described above.

NOTE 4 – DISCONTINUED OPERATIONS

The Company had no discontinued operations during the year.

NOTE 5 – INVESTMENTS

- A. Mortgage Loans, including Mezzanine Real Estate Loans - The Company owns no mortgage loans.
- B. Debt Restructuring – The Company owns no investments that were restructured.
- C. Reverse Mortgages – The Company owns no reverse mortgages.
- D. Loan-Backed Securities – The Company owns no loan-backed securities.
- E. Repurchase Agreements and/or Securities Lending Transactions – The Company owns no repurchase agreements and did not participate in any securities lending transactions.
- F. Real Estate – The Company owns no real estate.
- G. LIHTC – The Company has no investments in low-income housing.
- H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	1	2	3	4	5	6
	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase (Decrease) (1 minus 2)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Additional Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown					0.000	0.000
b. Collateral held under security lending arrangements					0.000	0.000
c. Subject to repurchase agreements					0.000	0.000
d. Subject to reverse repurchase agreements					0.000	0.000
e. Subject to dollar repurchase agreements					0.000	0.000
f. Subject to dollar reverse repurchase agreements					0.000	0.000
g. Placed under option contracts					0.000	0.000
h. Letter stock or securities restricted as to sale-excluding FHLB capital stock					0.000	0.000
i. LFHLB capital stock	516,487	516,429	58	516,487	6.122	7.991
j. On deposit with states					0.000	0.000
k. On deposit with other regulatory bodies					0.000	0.000
l. Pledged as collateral to FHLB (including assets backing funding agreements)					0.000	0.000
m. Pledged as collateral not captured in other categories	516,487	516,429	58	516,487	6.122	7.991
n. Other restricted assets						
m. Total Restricted Assets						

- (a) Subset of column 1
- (b) Subset of column 3

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

Restricted Asset Category	1	2	3	4	5	6
	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase (Decrease) (1 minus 2)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Additional Restricted to Total Admitted Assets
					0.000	0.000
Total					0.000	0.000

- (a) Subset of column 1
- (b) Subset of column 3

(3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

Restricted Asset Category	1	2	3	4	5	6
	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase (Decrease) (1 minus 2)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Additional Restricted to Total Admitted Assets
					0.000	0.000
Total					0.000	0.000

- (a) Subset of column 1
- (b) Subset of column 3

NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

The Company has no interest in joint ventures, partnerships and limited liability companies.

NOTE 7 – INVESTMENT INCOME

The Company had no due and accrued income that was excluded from surplus

NOTES TO FINANCIAL STATEMENTS

NOTE 8 – DERIVATIVE INSTRUMENTS

The Company owns no derivative instruments.

NOTE 9 – INCOME TAXES

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	2013			2012			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
a. Gross deferred tax assets	450,420		450,420	331,855		331,855	118,565		118,565
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)	450,420		450,420	331,855		331,855	118,565		118,565
d. Deferred tax assets nonadmitted	450,420		450,420	331,855		331,855	118,565		118,565
e. Subtotal net admitted deferred tax asset (1c-1d)									
f. Deferred tax liabilities									
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)									

2. Admission Calculation Components

	2013			2012			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	450,420		450,420	324,665		324,665	125,755		125,755
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below:									
Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
Adjusted gross deferred tax assets allowed per limitation threshold									
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	(450,420)		(450,420)	(324,665)		(324,665)	(125,755)		(125,755)
d. Deferred tax assets admitted as the result of application of SSAP 101. Total 2(a)+2(b)+2(c)									

3. Other Admissibility Criteria

		2013	2012
a.	Ratio percentage used to determine recovery period and threshold limitation amount	0.000	0.000
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above		

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	12/31/13		12/31/12		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	450,420		331,855		118,565	
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000	0.000	0.000	0.000	0.000	0.000
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)						
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.000	0.000	0.000	0.000	0.000	0.000

(b) Does the company's tax planning strategies include the use of reinsurance? NO

B. Deferred Tax Liabilities Not Recognized - None

NOTES TO FINANCIAL STATEMENTS

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
	2012	2011	(Col 1-2) Change
a. Federal			
b. Foreign			
c. Subtotal			
d. Federal income tax on net capital gains			
e. Utilization of capital loss carry-forwards			
f. Other			
g. Federal and Foreign income taxes incurred			

2. Deferred Tax Assets

	1	2	3
	2013	2012	(Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses			
2. Unearned premium reserve			
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			
6. Policyholder dividends accrual			
7. Fixed assets			
8. Compensation and benefits accrual			
9. Pension accrual			
10. Receivables - nonadmitted	7,190	7,190	
11. Net operating loss carry-forward	443,230	324,665	118,565
12. Tax credit carry-forward			
13. Other (including items <5% of total ordinary tax assets)			
99. Subtotal	450,420	331,855	118,565
b. Statutory valuation allowance adjustment			
c. Nonadmitted	450,420	331,855	118,565
d. Admitted ordinary deferred tax assets (2a99-2b-2c)			
e. Capital:			
1. Investments			
2. Net capital loss carry-forward			
3. Real estate			
4. Other (including items <5% of total capital tax assets)			
99. Subtotal			
f. Statutory valuation allowance adjustment			
g. Nonadmitted			
h. Admitted capital deferred tax assets (2e99-2f-2g)			
i. Admitted deferred tax assets (2d+2h)			

3. Deferred Tax Liabilities

	1	2	3
	2013	2012	(Col 1-2) Change
a. Ordinary:			
1. Investments			
2. Fixed assets			
3. Deferred and uncollected premium			
4. Policyholder reserves			
5. Other (including items <5% of total ordinary tax assets)			
99. Subtotal			
b. Capital:			
1. Investments			
2. Real estate			
3. Other (including items <5% of total capital tax assets)			
99. Subtotal			
c. Deferred tax liabilities (3a99+3b99)			

4.	Net Deferred Tax Assets (2i – 3c)		
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D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate  
Among the more significant book to tax adjustments were the following:

	2013	
	Amount	Effective Tax Rate (%)
Permanent Differences:		
Provision computed at statutory rate		
Proration of tax exempt investment income		
Tax exempt income deduction		
Dividends received deduction		
Disallowed travel and entertainment		
Other permanent differences		
Temporary Differences:		

NOTES TO FINANCIAL STATEMENTS

Total ordinary DTAs		
Total ordinary DTLs		
Total capital DTAs		
Total capital DTLs		
Other:		
Statutory valuation allowance adjustment		
Accrual adjustment – prior year		
Other		
Totals		
Federal and foreign income taxes incurred		
Realized capital gains (losses) tax		
Change in net deferred income taxes		
Total statutory income taxes		

- E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits
  - At December 31, 2013, the Company had \$916,578 of operating loss carry forward amounts available to offset against future taxable income.
  - The following is income tax expense for 2013 and 2012 that is available for recoupment in the event of future net losses:

Year	Amount
2013	0
2012	0
  - The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.
- F. Consolidated Federal Income Tax Return
  - The Company's federal income tax return is consolidated with the parent company, Tenet Healthcare Corporation.
  - The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return. Intercompany tax balances are settled monthly.
- G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

NOTE 10 – INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES

- A,B The Company's tax return is consolidated with its parent.
- C. Amounts paid agree with those reported in item B and on Schedule Y, Part 2.

On October 1, 2013 Harbor Health Plan, Inc. (Harbor) underwent a change of control when Tenet Healthcare Corporation (Tenet) acquired control of Harbor through and agreement and plan of merger with Vanguard Health Systems, Inc. Approval of the transaction was granted by the Michigan DIFS on August 30, 2013.

During 2013, the Company received a \$4 million surplus contribution in cash.

Effective October 23, 2012 Harbor entered into a management agreement with Advantage Health Care Management Company, Inc. (AHCMC), a wholly owned subsidiary of Tenet Healthcare Corporation, to manage the general and administrative functions for Harbor, which include payroll, advertising and related services. During 2013, Harbor has recorded expenses for approximately \$602,997 for services provided by AHCMC. Expenses for AHCMC services are included in general administrative expenses on the accompanying statements of income.

Receivable from affiliates (payable to affiliates) primarily represents the net excess (deficiency) of funds transferred to the centralized cash management account of Vanguard Health Management, Inc. (VHM), a wholly owned subsidiary of Tenet, by Harbor over (compared to) funds transferred from VHM to Harbor or paid by VHM on behalf of Harbor.

Receivable from affiliates or payable to affiliates balances are readily available to either party for settlement of current liabilities as they become due. Generally, the receivable from affiliates (payable to affiliates) balance is decreased (increased) by cash transfers from VHM's centralized cash management account to reimburse the Harbor bank accounts for operating expenses and capital expenditures and to pay Harbor's fees and services provided by VHM including information systems services and other operating expenses, such as payroll, interest and insurance. During 2013, interest expense of approximately \$227,322 was charged to Harbor on the shortage of receivable from affiliates balances over payable to affiliates balances outstanding. Interest expense is included in net investment income in the accompanying Statements of Income.
- D. At December 31, 2013, the Company reported \$1,522,706 due to its Parent Company. These amounts are settled in accordance with intercompany agreements. At December 31, 2013, the Company reported \$14,900 due to AHCMC for reimbursement of expenses paid on their behalf.
- E. The Company has not made any guarantees or undertakings for the benefit of any affiliate or related parties that result in a material contingent exposure of the Company's assets to liability.
- F. The Company has no agreements with the Parent or Affiliates involving management or service contracts or any other cost-sharing arrangements, other than cost allocation arrangements based upon generally accepted accounting principles.
- G. All outstanding shares of common stock are owned by the Company's Parent, Tenet Healthcare Corporation.
- H. The Company holds no stock in affiliated companies.
- I. The Company has no interest in any other insurance companies.
- J. The Company has no interest in any other insurance companies.
- K. The Company has no interest in a foreign insurance company.
- L. The Company has no interest in a downstream noninsurance holding company.

NOTE 11 – DEBT

- A. The Company has no outstanding liability for borrowed money.
- B. FHLB (Federal Home Loan Bank) Agreements - The Company has no FHLB Agreements.

NOTES TO FINANCIAL STATEMENTS

NOTE 12 - RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

- A. Defined Benefit Plan – The Company has no employees.
- B. Investment Policies and Strategies – The Company has no defined benefit plans.
- C. Fair Value of Plan Assets – The Company has no defined benefit plans.
- D. Basis Used to Determine Expected Long-Term Rate-of-Return – The Company has no defined benefit plans.
- E. Defined Contribution Plan – The Company has no employees.
- F. Multiemployer Plans – The Company has no employees.
- G. Consolidated/Holding Company Plans – The Company has no employees.
- H. Postretirement Benefits and Compensated Absences – The Company has no employees.
- I. Impact of Medicate Modernization Act on Postretirement Benefits – The Company has no employees.

NOTE 13 – CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS

- A. The Company has 60,000 shares authorized, 60,000 shares issued and outstanding of \$1 par value Class A shares.
- B. The Company has no preferred stock outstanding.
- C. No dividends can be paid without prior approval of its domiciliary commissioner. Dividends to shareholders are limited by the laws of the Company's state of incorporation, Michigan, to an amount that is based on restrictions relating to statutory surplus.
- D. The Company paid no ordinary dividends during the year.
- E. Within the limitations of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- F. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- G. The Company has made no advances to surplus.
- H. No amounts of stock are held by the Company, including stock of affiliated companies, for special purposes.
- I. The Company has no special surplus funds.
- J. The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$0
- K. The Company has no surplus debentures or similar obligations outstanding.
- L. There have been no quasi-reorganizations during the period covered by this financial statement.
- M. N/A

NOTE 14 – CONTINGENCIES

- A. Contingent Commitments – The Company is not aware of any material contingent liabilities
- B. Assessments – N/A
- C. Gain Contingencies – The Company is not aware of any material contingent liabilities
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits – Management does not consider contingent liabilities arising from claims related extra contractual obligations and bad faith losses stemming from lawsuits to be material in relation to the financial position of the Company.
- E. All Other Contingencies – Management does not consider contingent liabilities arising from other litigation, income taxes or other matters to be material in relation to the financial position of the Company.

NOTE 15 – LEASES

- A. Lessee Operating Lease – The Company does not have any material lease obligations
- B. Revenue, Net Income or Assets with Respect to Leases – The Company does not have any material lease obligations

NOTE 16 – INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

The Company does not have any financial instruments with off-balance sheet risk nor does it have any concentrations of credit risk.

NOTE 17 – SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

- A. The Company had no transfers of receivables during 2013.
- B. The Company has no transactions to be reported in accordance with SSAP No. 91R, Accounting for Transfers and Servicing of Financial Assets and Extinguishments of Liabilities.
- C. The Company had no Wash Sales during 2013.

NOTE 18 – GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE PORTION OF PARTIALLY INSURED PLANS

The Company does not administer uninsured or partially uninsured A&H plans.

NOTES TO FINANCIAL STATEMENTS

NOTE 19 – DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS

The Company has no direct premium written through managing general agents or third party administrators.

NOTE 20 – FAIR VALUE MEASUREMENTS

A. (1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
Total				

Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
Total				

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

a. Assets	Beginning Balance at 1/1/2013	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2013
Total										

b. Liabilities	Beginning Balance at 1/1/2013	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2013
Total										

- (3) The Company uses the end of the reporting period to recognize transfers into and out of Level 3.
- (4) As of December 31, 2013, the Company had no assets classified in Level 3.
- (5) The Company has no derivative assets.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Total						

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
		0.000		
Total				

21. OTHER ITEMS

- A. Extraordinary Items – The Company recorded no extraordinary items during 2013.
- B. Troubled Debt Restructuring Debtors – The Company has no mortgage or restructured loans.
- C. Other Disclosures and Unusual Items – The Company has no unreported cash deposits or amounts segregated for others.
- D. Business Interruption Insurance Recoveries – The Company had no business interruption insurance recoveries in 2013.
- E. State Transferable and Non-Transferable Tax Credits – The Company has no state tax credits.
- F. Subprime Mortgage Related Risk Exposure – The Company has no subprime mortgage related risk exposure
- G. Retained Assets – The Company does not use retained asset accounts for beneficiaries.
- H. Offsetting and Netting of Assets and Liabilities – The Company has no derivative, repurchase or securities borrowing/lending assets.
- I. Joint and Several Liabilities – The Company has no liability arrangements under SSAP No. 5R.

NOTE 22 – EVENTS SUBSEQUENT

Type I – Recognized Subsequent Events:

Subsequent events have been considered through February 25, 2014 for the statutory statement issued as of December 31, 2013. There are no events which have a material effect on the financial conditions of the Company.

Type II – Nonrecognized Subsequent Events:

Subsequent events have been considered through February 25, 2014 for the statutory statement issued as of December 31, 2013. There are no events which have a material effect on the financial conditions of the Company.

NOTES TO FINANCIAL STATEMENTS

NOTE 23 – REINSURANCE

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? Yes ( ) No( X ) If yes, give full details.
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business? Yes ( ) No( X ) If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? Yes ( ) No( X )
  - a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$0
  - b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$0
- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes ( ) No( X )

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? \$0
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? Yes ( ) No( X )

- B. Uncollectible Reinsurance – The Company had no write-offs of reinsurance balance due during the current year
- C. Commutation of Ceded Reinsurance - The Company has not commutation any reinsurance during the current year
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation – No reinsurers the Company uses have been downgraded.

NOTE 24 – RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDTERMINATION

The Company has no direct written retrospectively rated contracts.

NOTE 25 – CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years have not changed as a result of re-estimation of unpaid losses and loss adjustment expenses.

NOTE 26 – INTERCOMPANY POOLING ARRANGEMENTS

The Company has no intercompany pooling arrangements.

NOTE 27 – STRUCTURED SETTLEMENTS

Not Applicable

NOTE 28 – HEALTH CARE RECEIVABLES

- A. Pharmaceutical Rebate Receivables – the Company does not have any pharmaceutical receivables.
- B. Risk Sharing Receivables – the Company does not have any risk sharing receivables.

NOTE 29 – PARTICIPATING POLICIES

The Company has no individual or group accident and health participating policies.

NOTE 30 – PREMIUM DEFICIENCY RESERVES

- 1. Liability carried for premium deficiency reserve:
- 2. Date of most recent evaluation of this liability:
- 3. Was anticipated investment income utilized in the calculation?

NOTE 31 – ANTICIPATED SALVAGE AND SUBROGATION

As of December 31, 2013, the Company does not anticipate any salvage or subrogation recoveries.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  
  
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [ X ]      No [   ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [ X ]      No [   ]      N/A [   ]

1.3

State regulating?  
Michigan

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [   ]      No [ X ]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2012

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity.  
  
This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2012

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

02/19/2014

3.4

By what department or departments?  
State of Michigan, Office of Financial and Insurance Regulation

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [ X ]      No [   ]      N/A [   ]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [ X ]      No [   ]      N/A [   ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [   ]      No [ X ]

4.12

renewals?

Yes [   ]      No [ X ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes [   ]      No [ X ]

4.22

renewals?

Yes [   ]      No [ X ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [   ]      No [ X ]

5.2

If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Co. Code	State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [   ]      No [ X ]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [   ]      No [ X ]

7.2

If yes,

7.21

State the percentage of foreign control

.....%

7.22

State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact)

1	2
Nationality	Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [   ]      No [ X ]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [   ]      No [ X ]

8.4

If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
Yeo and Yeo  
13305 Reeck Rd, Southgate, MI

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [   ]      No [ X ]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation?

Yes [   ]      No [ X ]

10.4

If the response to 10.3 is yes, provide information related to this exemption:



PART 1 - COMMON INTERROGATORIES - FINANCIAL

22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [ ☐ ]    No [ ☒ ]

22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

.....

22.22

Amount paid as expenses

.....

22.23

Other amounts paid

.....

23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [ ☒ ]    No [ ☐ ]

23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount.

\$.....0

PART 1 - COMMON INTERROGATORIES - INVESTMENT

24.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes [ ☒ ]    No [ ☐ ]

24.02

If no, give full and complete information relating thereto.

.....

24.03

For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

.....

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions?

Yes [ ☐ ]    No [ ☐ ]    N/A [ ☒ ]

24.05

If answer to 24.04 is yes, report amount of collateral for conforming programs.

.....

24.06

If answer to 24.04 is no, report amount of collateral for other programs.

.....

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes [ ☐ ]    No [ ☐ ]    N/A [ ☒ ]

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes [ ☐ ]    No [ ☐ ]    N/A [ ☒ ]

24.09

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes [ ☐ ]    No [ ☐ ]    N/A [ ☒ ]

24.10

For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

.....

24.102

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

.....

24.103

Total payable for securities lending reported on the liability page.

.....

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03)

Yes [ ☒ ]    No [ ☐ ]

25.2

If yes, state the amount thereof at December 31 of the current year:

25.21

Subject to repurchase agreements

\$.....0

25.22

Subject to reverse repurchase agreements

\$.....0

25.23

Subject to dollar repurchase agreements

\$.....0

25.24

Subject to reverse dollar repurchase agreements

\$.....0

25.25

Pledged as collateral

\$.....0

25.26

Placed under option agreements

\$.....0

25.27

Letter stock or securities restricted as to sale

\$.....0

25.28

On deposit with state or other regulatory body

\$.....516,487

25.29

Other

\$.....0

25.3

For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [ ☐ ]    No [ ☒ ]

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes [ ☐ ]    No [ ☐ ]    N/A [ ☒ ]

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [ ☐ ]    No [ ☒ ]

27.2

If yes, state the amount thereof at December 31 of the current year:

.....

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [ ☒ ]    No [ ☐ ]

28.01

For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Comerica	Detroit, MI

28.02

For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [ ☐ ]    No [ ☒ ]

28.04

If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05

Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address

29.1

Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [ ☐ ]    No [ ☒ ]

PART 1 - COMMON INTERROGATORIES - INVESTMENT

29.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
29.2999. TOTAL		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from the above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	Date of Valuation

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	516,487	516,487	0
30.2 Preferred stocks.....			0
30.3 Totals.....	516,487	516,487	0

30.4 Describe the sources or methods utilized in determining the fair values:  
Rates for fair market values were obtained from the trust company (only invested in exempt money market fund).

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [ X ]    No [   ]
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [ X ]    No [   ]
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D.

- 32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [ X ]    No [   ]
- 32.2 If no, list exceptions:

PART 1 - COMMON INTERROGATORIES - OTHER

- 33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$.....0
- 33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid

- 34.1 Amount of payments for legal expenses, if any?

\$.....0
- 34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid

- 35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$.....0
- 35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

NONE

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

- 1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [ ☐ ]

No [ ☒ X ]
- 1.2

If yes, indicate premium earned on U.S. business only
- 1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?
- 1.31

Reason for excluding

- 1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.
- 1.5

Indicate total incurred claims on all Medicare Supplement insurance.
- 1.6

Individual policies:

Most current three years:

1.61

Total premium earned

1.62

Total incurred claims

1.63

Number of covered lives

All years prior to most current three years:

1.64

Total premium earned

1.65

Total incurred claims

1.66

Number of covered lives
- 1.7

Group policies:

Most current three years:

1.71

Total premium earned

1.72

Total incurred claims

1.73

Number of covered lives

All years prior to most current three years:

1.74

Total premium earned

1.75

Total incurred claims

1.76

Number of covered lives

2.

Health test:

	1	2
	Current Year	Prior Year
2.1	Premium Numerator.....8,910,616	.....7,931,304
2.2	Premium Denominator.....8,910,616	.....7,931,304
2.3	Premium Ratio (2.1/2.2).....100.0	.....100.0
2.4	Reserve Numerator.....1,470,960	.....1,139,527
2.5	Reserve Denominator.....1,470,960	.....1,139,527
2.6	Reserve Ratio (2.4/2.5).....100.0	.....100.0

- 3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, and if the earnings of the reporting entity permits?

Yes [ ☐ ]

No [ ☒ X ]
- 3.2

If yes, give particulars:

- 4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [ ☒ X ]

No [ ☐ ]
- 4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [ ☐ ]

No [ ☒ X ]
- 5.1

Does the reporting entity have stop-loss reinsurance?

Yes [ ☒ X ]

No [ ☐ ]
- 5.2

If no, explain:

- 5.3

Maximum retained risk (see instructions):
- 5.31

Comprehensive medical

\$.....142,500
- 5.32

Medical only

\$.....0
- 5.33

Medicare supplement

\$.....0
- 5.34

Dental and vision

\$.....0
- 5.35

Other limited benefit plan

\$.....0
- 5.36

Other

\$.....0

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
- 7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?

Yes [ ☒ X ]

No [ ☐ ]
- 7.2

If no, give details:

8.

Provide the following information regarding participating providers:
- 8.1

Number of providers at start of reporting year

.....1,545
- 8.2

Number of providers at end of reporting year

.....1,487
- 9.1

Does the reporting entity have business subject to premium rate guarantees?

Yes [ ☐ ]

No [ ☒ X ]
- 9.2

If yes, direct premium earned:
- 9.21

Business with rate guarantees between 15-36 months
- 9.22

Business with rate guarantees over 36 months
- 10.1

Does the reporting entity have Incentive Pool, Withhold or Bonus arrangements in its provider contracts?

Yes [ ☒ X ]

No [ ☐ ]
- 10.2

If yes:
- 10.21

Maximum amount payable bonuses

\$.....0
- 10.22

Amount actually paid for year bonuses

\$.....0
- 10.23

Maximum amount payable withholds

\$.....0
- 10.24

Amount actually paid for year withholds

\$.....0

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

- 11.1

Is the reporting entity organized as:
- 11.12

A Medical Group/Staff Model,

Yes [ ☐ ]      No [ ☒ ]
- 11.13

An Individual Practice Association (IPA), or

Yes [ ☒ ]      No [ ☐ ]
- 11.14

A Mixed Model (combination of above)?

Yes [ ☐ ]      No [ ☒ ]
- 11.2

Is the reporting entity subject to Minimum Net Worth Requirements?

Yes [ ☒ ]      No [ ☐ ]
- 11.3

If yes, show the name of the state requiring such net worth.

State of Michigan, Office of Financial and Insurance Regulation
- 11.4

If yes, show the amount required.

\$.....3,000,000
- 11.5

Is this amount included as part of a contingency reserve in stockholder's equity?

Yes [ ☐ ]      No [ ☒ ]
- 11.6

If the amount is calculated, show the calculation:

12.

List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
Wayne County, Michigan

- 13.1

Do you act as a custodian for health savings account?

Yes [ ☐ ]      No [ ☒ ]
- 13.2

If yes, please provide the amount of custodial funds held as of the reporting date.

.....
- 13.3

Do you act as an administrator for health savings accounts?

Yes [ ☐ ]      No [ ☒ ]
- 13.4

If yes, please provide the balance of the funds administered as of the reporting date.

.....

FIVE-YEAR HISTORICAL DATA

	1 2013	2 2012	3 2011	4 2010	5 2009
<b>Balance Sheet Items (Pages 2 and 3)</b>					
1. Total admitted assets (Page 2, Line 28).....	6,463,259	3,441,532	4,352,622	4,626,285	3,639,703
2. Total liabilities (Page 3, Line 24).....	1,703,127	1,777,305	2,264,179	2,417,890	1,494,110
3. Statutory surplus.....	3,000,000	3,000,000	1,500,000	1,500,000	1,500,000
4. Total capital and surplus (Page 3, Line 33).....	4,760,132	1,664,227	1,826,654	2,208,035	2,145,593
<b>Income Statement Items (Page 4)</b>					
5. Total revenues (Line 8).....	8,910,616	7,982,735	7,396,470	6,505,043	4,437,813
6. Total medical and hospital expenses (Line 18).....	7,552,578	5,054,404	4,496,972	4,252,946	2,817,366
7. Claims adjustment expenses (Line 20).....	463,816	157,909		9,000	10,950
8. Total administrative expenses (Line 21).....	935,286	2,830,331	2,569,713	2,192,917	1,862,471
9. Net underwriting gain (loss) (Line 24).....	(41,064)	(59,909)	329,785	50,180	(252,974)
10. Net investment gain (loss) (Line 27).....	(226,447)	(6,632)	(6,357)	(15,718)	5,151
11. Total other income (Lines 28 plus 29).....					500,000
12. Net income or (loss) (Line 32).....	(267,511)	(66,541)	244,441	34,462	252,177
<b>Cash Flow (Page 6)</b>					
13. Net cash from operations (Line 11).....	(401,791)	(554,065)	226,812	971,454	433,597
<b>Risk-Based Capital Analysis</b>					
14. Total adjusted capital.....	4,760,132	1,664,227	1,826,654	2,208,035	2,145,593
15. Authorized control level risk-based capital.....	490,574	344,178	259,759	239,074	164,433
<b>Enrollment (Exhibit 1)</b>					
16. Total members at end of period (Column 5, Line 7).....	2,682	2,121	1,946	1,823	1,423
17. Total member months (Column 6, Line 7).....	28,909	25,714	22,832	19,862	13,475
<b>Operating Percentage (Page 4)</b> <b>(Item divided by Page 4, sum of Lines 2, 3, and 5) x 100 .0</b>					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5).....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19)..	84.8	63.7	60.8	65.4	62.6
20. Cost containment expenses.....					
21. Other claims adjustment expenses.....	5.2	2.0		0.1	0.2
22. Total underwriting deductions (Line 23).....	100.5	101.4	95.5	99.2	104.2
23. Total underwriting gain (loss) (Line 24).....	(0.5)	(0.8)	4.5	0.8	(5.6)
<b>Unpaid Claims Analysis (U&amp;I Exhibit, Part 2B)</b>					
24. Total claims incurred for prior years (Line 13 Col. 5).....	927,937	831,073	1,138,302	1,421,523	570,558
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]	1,139,527	1,911,486	1,882,748	1,389,152	706,558
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....					
27. Affiliated preferred stocks (Sch D. Summary, Line 18, Col. 1).....					
28. Affiliated common stocks (Sch D. Summary, Line 24, Col. 1).....					
29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10).....					
30. Affiliated mortgage loans on real estate.....					
31. All other affiliated.....					
32. Total of above Lines 26 to 31.....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.....					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [ ☐ ]No [ ☐ ]

If no, please explain:

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

			1	Direct Business Only							
				2	3	4	5	6	7	8	9
State, Etc.			Active Status	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama.....AL	N.....								0	
2.	Alaska.....AK	N.....								0	
3.	Arizona.....AZ	N.....								0	
4.	Arkansas.....AR	N.....								0	
5.	California.....CA	N.....								0	
6.	Colorado.....CO	N.....								0	
7.	Connecticut.....CT	N.....								0	
8.	Delaware.....DE	N.....								0	
9.	District of Columbia.....DC	N.....								0	
10.	Florida.....FL	N.....								0	
11.	Georgia.....GA	N.....								0	
12.	Hawaii.....HI	N.....								0	
13.	Idaho.....ID	N.....								0	
14.	Illinois.....IL	N.....								0	
15.	Indiana.....IN	N.....								0	
16.	Iowa.....IA	N.....								0	
17.	Kansas.....KS	N.....								0	
18.	Kentucky.....KY	N.....								0	
19.	Louisiana.....LA	N.....								0	
20.	Maine.....ME	N.....								0	
21.	Maryland.....MD	N.....								0	
22.	Massachusetts.....MA	N.....								0	
23.	Michigan.....MI	L.....			8,986,097					8,986,097	
24.	Minnesota.....MN	N.....								0	
25.	Mississippi.....MS	N.....								0	
26.	Missouri.....MO	N.....								0	
27.	Montana.....MT	N.....								0	
28.	Nebraska.....NE	N.....								0	
29.	Nevada.....NV	N.....								0	
30.	New Hampshire.....NH	N.....								0	
31.	New Jersey.....NJ	N.....								0	
32.	New Mexico.....NM	N.....								0	
33.	New York.....NY	N.....								0	
34.	North Carolina.....NC	N.....								0	
35.	North Dakota.....ND	N.....								0	
36.	Ohio.....OH	N.....								0	
37.	Oklahoma.....OK	N.....								0	
38.	Oregon.....OR	N.....								0	
39.	Pennsylvania.....PA	N.....								0	
40.	Rhode Island.....RI	N.....								0	
41.	South Carolina.....SC	N.....								0	
42.	South Dakota.....SD	N.....								0	
43.	Tennessee.....TN	N.....								0	
44.	Texas.....TX	N.....								0	
45.	Utah.....UT	N.....								0	
46.	Vermont.....VT	N.....								0	
47.	Virginia.....VA	N.....								0	
48.	Washington.....WA	N.....								0	
49.	West Virginia.....WV	N.....								0	
50.	Wisconsin.....WI	N.....								0	
51.	Wyoming.....WY	N.....								0	
52.	American Samoa.....AS	N.....								0	
53.	Guam.....GU	N.....								0	
54.	Puerto Rico.....PR	N.....								0	
55.	U.S. Virgin Islands.....VI	N.....								0	
56.	Northern Mariana Islands.....MP	N.....								0	
57.	Canada.....CAN	N.....								0	
58.	Aggregate Other alien.....OT	XXX.....	0	0	0	0	0	0	0	0	0
59.	Subtotal.....	XXX.....	0	0	8,986,097	0	0	0	0	8,986,097	0
60.	Reporting entity contributions for Employee Benefit Plans.....	XXX.....								0	
61.	Total (Direct Business).....	(a).....1	0	0	8,986,097	0	0	0	0	8,986,097	0

DETAILS OF WRITE-INS

58001. ....								0	
58002. ....								0	
58003. ....								0	
58998. Summary of remaining write-ins for line 58.....		0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 + 58998).....		0	0	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer; (E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, premiums by state, etc.

All premium is allocated to the state that originates the business

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

Ownership Chart: Tenet Healthcare Corporation  
Tenet Healthcare Corporation  
Time: 02/19/2014 05:25:12 CST

Tenet Healthcare Corporation  
Nevada, Corporation, FEIN 95-2557091

Conifer Holdings, Inc.  
Delaware, Corporation, FEIN 26-3392552

DigitalMed, Inc.  
Delaware, Corporation, FEIN 75-2859557

HUG Services, Inc.  
Delaware, Corporation, FEIN 62-1260528

National Imaging Center Holdings, Inc.  
Delaware, Corporation, FEIN 36-4732119

Selma Carlson, Inc.  
California, Corporation, FEIN 45-5404958

National Surgery Center Holdings, Inc.  
Delaware, Corporation, FEIN 45-4835778

Bluffton Okatie Surgery Center, L.L.C.  
South Carolina, Limited Liability Company, FEIN 36-4730753

GC&A Ambulatory Surgery Center, LLC  
Texas, Limited Liability Company, FEIN 61-1699459

Murdock Ambulatory Surgery Center, LLC  
Florida, Limited Liability Company, FEIN 20-1543128

Pacific Endoscopy and Surgery Center, LLC  
California, Limited Liability Company, FEIN 20-5755383

Pediatric Surgery Center - Odessa, LLC  
Florida, Limited Liability Company, FEIN 65-1274446

Pediatric Surgery Centers, LLC  
Florida, Limited Liability Company, FEIN 20-1711553

Surgery Center of Pembroke Pines, L.L.C.  
Florida, Limited Liability Company, FEIN 26-3364068

Winter Haven Ambulatory Surgical Center, L.L.C.  
Florida, Limited Liability Company, FEIN 59-3659906

Theda Oaks Gastroenterology & Endoscopy Center, LLC  
Texas, Limited Liability Company, FEIN 02-0594510

The Tresanti Surgical Center, LLC  
California, Limited Liability Company, FEIN 71-0905694

National Urgent Care Holdings, Inc.  
Delaware, Corporation, FEIN 45-4805957

AMC/North Fulton Urgent Care #2, L.L.C.  
Georgia, Limited Liability Company, FEIN 90-0863961

AMC/North Fulton Urgent Care #3, L.L.C.  
Georgia, Limited Liability Company, FEIN 90-0864201

AMC/North Fulton Urgent Care #4, L.L.C.  
Georgia, Limited Liability Company, FEIN 37-1696225

AMC/North Fulton Urgent Care #5, L.L.C.  
Georgia, Limited Liability Company, FEIN 36-4761708

AMC/North Fulton Urgent Care #6, L.L.C.  
Georgia, Limited Liability Company, FEIN 37-1735592

Camp Creek Urgent Care, L.L.C.  
Georgia, Limited Liability Company, FEIN 80-0815040

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Des Peres Urgent Care, L.L.C.</b> Missouri, Limited Liability Company, FEIN 38-3874874	
<b>Memphis Urgent Care #1, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 30-0741250	
<b>Memphis Urgent Care #2, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 61-1686449	
<b>Walker Street Imaging Care, Inc.</b> California, Corporation, FEIN 45-5512758	
<b>Olive Branch Urgent Care #1, LLC</b> Mississippi, Limited Liability Company, FEIN 61-1713671	
<b>West Boynton Urgent Care, L.L.C.</b> Florida, Limited Liability Company, FEIN 90-0815244	
<b>St. Louis Urgent Care #2, L.L.C.</b> Missouri, Limited Liability Company, FEIN 35-2448175	
<b>St. Louis Urgent Care #3, L.L.C.</b> Missouri, Limited Liability Company, FEIN 35-2448179	
<b>AMC/North Fulton Urgent Care #1, L.L.C.</b> Georgia, Limited Liability Company, FEIN 80-0969313	
<b>NME Headquarters, Inc.</b> California, Corporation, FEIN 95-4164375	
<b>NME Properties Corp.</b> Tennessee, Corporation, FEIN 62-0725891	
<b>NME Properties, Inc.</b> Delaware, Corporation, FEIN 91-0628039	
<b>Lake Health Care Facilities Inc.</b> Delaware, Corporation, FEIN 39-1225411	
<b>NME Property Holding Co., Inc.</b> Delaware, Corporation, FEIN 91-1172506	
<b>NME Properties, Inc.</b> Delaware, Corporation, FEIN 91-0628039	
<b>Tenet HealthSystem SNF-LA, Inc.</b> Delaware, Corporation, FEIN 75-2725878	
<b>NME Psychiatric Hospitals, Inc.</b> Delaware, Corporation, FEIN 52-1270430	
<b>The Huron Corporation</b> District of Columbia, Corporation, FEIN 52-1061048	
<b>Syndicated Office Systems, LLC (INACTIVE)</b> California, Limited Liability Company, FEIN 95-3154917	
<b>Tenet HealthSystem International, Inc.</b> California, Corporation, FEIN 95-3403101	
<b>N.M.E. International (Cayman) Limited</b> Cayman Islands, Unknown, FEIN 95-3509796-S	
<b>HUG Services, Inc.</b> Delaware, Corporation, FEIN 62-1260528	
<b>The Healthcare Insurance Corporation</b> Cayman Islands, Corporation,	
<b>Tenet HealthSystem HealthCorp</b> Delaware, Corporation, FEIN 75-1776092	
<b>Commonwealth Continental Health Care, Inc.</b> Florida, Corporation, FEIN 65-0270101	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
North Miami Medical Center, Ltd. Florida, Limited Partnership, FEIN 75-2222461	
GCPG, Inc. Delaware, Corporation, FEIN 75-2002763	
Garland MOB Properties, LLC Texas, Limited Liability Company, FEIN 20-0123290	
OrNda Hospital Corporation California, Corporation, FEIN 95-3789009	
AHM Acquisition Co., Inc. Delaware, Corporation, FEIN 62-1599281	
Coral Gables Hospital, Inc. Florida, Corporation, FEIN 59-2243206	
CGH Hospital, Ltd. Florida, Limited Partnership, FEIN 65-0638215	
Coral Gables Physician Services, L.L.C. Florida, Limited Liability Company, FEIN 26-0513226	
Universal Medical Care Center, L.L.C. Florida, Limited Liability Company, FEIN 90-0883542	
Cypress Fairbanks Medical Center Inc. Texas, Corporation, FEIN 74-2054101	
New Medical Horizons II, Ltd. Texas, Limited Partnership, FEIN 74-2129954	
FMC Medical, Inc. Florida, Corporation, FEIN 65-0638327	
CGH Hospital, Ltd. Florida, Limited Partnership, FEIN 65-0638215	
Fountain Valley Regional Hospital and Medical Center California, Corporation, FEIN 95-2768729	
Specialty Surgery Center at Fountain Valley Regional Hospital, L.L.C. California, Limited Liability Company, FEIN 26-0260330	
GCPG, Inc. Delaware, Corporation, FEIN 75-2002763	
Houston Northwest Medical Center, Inc. Delaware, Corporation, FEIN 75-2301938	
HNMC, Inc. Delaware, Corporation, FEIN 76-0026648	
HNW GP, Inc. Delaware, Corporation, FEIN 76-0518578	
Houston Northwest Partners, Ltd. Texas, Limited Partnership, FEIN 76-0520701	
Conroe Surgery Center 2, LLC Texas, Limited Liability Company, FEIN 76-0697645	
Northwest Surgery Center, Ltd. Texas, Limited Partnership, FEIN 76-0452319	
HNW LP, Inc. Delaware, Corporation, FEIN 75-2694713	
Houston Northwest Partners, Ltd. Texas, Limited Partnership, FEIN 76-0520701	
Northwest Houston Providers Alliance, Inc. Texas, Corporation, FEIN 76-0425440	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Newhope Imaging Center, Inc.</b> California, Corporation, FEIN 45-4094065	
<b>Republic Health Corporation of Rockwall County</b> Nevada, Corporation, FEIN 74-2250111	
<b>Lake Pointe GP, Inc.</b> Delaware, Corporation, FEIN 75-2687870	
<b>Lake Pointe ASC GP, Inc.</b> Texas, Corporation, FEIN 20-1006020	
<b>Lake Pointe Rockwall ASC, LP</b> Texas, Limited Partnership, FEIN 20-1006048	
<b>Lake Pointe Partners, Ltd.</b> Texas, Limited Partnership, FEIN 75-2713337	
<b>Lake Pointe Investments, Inc.</b> Delaware, Corporation, FEIN 75-2687874	
<b>Lake Pointe Partners, Ltd.</b> Texas, Limited Partnership, FEIN 75-2713337	
<b>Saint Vincent Healthcare System, Inc.</b> Delaware, Corporation, FEIN 04-3325085	
<b>Saint Vincent Hospital, L.L.C.</b> Massachusetts, Limited Liability Company, FEIN 04-3326833	
<b>SHLO Corp.</b> Delaware, Corporation, FEIN 90-0112637	
<b>Tenet HealthSystem CFMC, Inc.</b> Delaware, Corporation, FEIN 76-0524390	
<b>New Medical Horizons II, Ltd.</b> Texas, Limited Partnership, FEIN 74-2129954	
<b>NWSC, L.L.C.</b> Texas, Limited Liability Company, FEIN 27-3708204	
<b>Tenet MetroWest Healthcare System, Limited Partnership</b> Massachusetts, Limited Partnership, FEIN 04-3306651	
<b>Republic Health Corporation of Rockwall County (INACTIVE)</b> Nevada, Corporation, FEIN 74-2250111	
<b>Tenet HealthSystem Holdings, Inc.</b> Delaware, Corporation, FEIN 13-3527632	
<b>Tenet HealthSystem Medical, Inc.</b> Delaware, Corporation, FEIN 95-2111054	
<b>601 N 30th Street I, L.L.C.</b> Delaware, Limited Liability Company, FEIN 75-2583978	
<b>601 N 30th Street II, L.L.C.</b> Nebraska, Limited Liability Company, FEIN 27-2303333	
<b>601 N 30th Street III, Inc.</b> Nebraska, Corporation, FEIN 95-3929010	
<b>601 N 30th Street I, L.L.C.</b> Delaware, Limited Liability Company, FEIN 75-2583978	
<b>American Medical (Central), Inc.</b> California, Corporation, FEIN 95-2562501	
<b>Amisub (Heights), Inc.</b> Delaware, Corporation, FEIN 51-0337656	
<b>TH Healthcare, Ltd.</b> Texas, Limited Partnership, FEIN 76-0354630	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
MMC Lessor, L.P. Texas, Limited Partnership, FEIN 75-2803840	
Park Plaza Hospital Billing Center, L.L.C. Texas, Limited Liability Company, FEIN 45-2861160	
Amisub (Twelve Oaks), Inc. Delaware, Corporation, FEIN 51-0337657	
TH Healthcare, Ltd. Texas, Limited Partnership, FEIN 76-0354630	
Amisub of Texas, Inc. Delaware, Corporation, FEIN 51-0337655	
TH Healthcare, Ltd. Texas, Limited Partnership, FEIN 76-0354630	
Tenet Employment, Inc. Texas, Corporation, FEIN 95-4270805	
AMI Diagnostic Services, Inc. Nevada, Corporation, FEIN 95-3331908	
AMI Information Systems Group, Inc. California, Corporation, FEIN 95-2886310	
AMI/HTI Tarzana Encino Joint Venture Delaware, General Partnership, FEIN 76-0383712	
Amisub of Texas, Inc. Delaware, Corporation, FEIN 51-0337655	
AMI/HTI Tarzana Encino Joint Venture Delaware, General Partnership, FEIN 76-0383712	
Amisub (Hilton Head), Inc. South Carolina, Corporation, FEIN 75-2547799	
Hilton Head Health System, L.P. South Carolina, Limited Partnership, FEIN 75-2550947	
Amisub (North Ridge Hospital), Inc. Florida, Corporation, FEIN 95-3982366	
NRMHC Physician Services, L.L.C. Florida, Limited Liability Company, FEIN 20-5846668	
Amisub (SFH), Inc. Tennessee, Corporation, FEIN 75-2522262	
Saint Francis Hospital Billing Center, L.L.C. Tennessee, Limited Liability Company, FEIN 45-2909805	
Saint Francis Surgery Center, L.L.C. Tennessee, Limited Liability Company, FEIN 06-1641562	
Tenet HealthSystem SF-SNF, Inc. Tennessee, Corporation, FEIN 75-2731795	
Amisub of California, Inc. California, Corporation, FEIN 95-3455498	
AMI/HTI Tarzana Encino Joint Venture Delaware, General Partnership, FEIN 76-0383712	
Amisub of North Carolina, Inc. North Carolina, Corporation, FEIN 95-3409179	
Central Carolina Ambulatory Surgery Center, LLC North Carolina, Limited Liability Company, FEIN 20-0148144	
Amisub of South Carolina, Inc. South Carolina, Corporation, FEIN 95-3561198	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
Rock Hill Surgery Center, L.P. South Carolina, Limited Partnership, FEIN 75-2562111	
Tenet Rehab Piedmont, Inc. South Carolina, Corporation, FEIN 75-2653775	
Amisub of Texas, Inc. Delaware, Corporation, FEIN 51-0337655	
Brookwood Center Development Corporation Alabama, Corporation, FEIN 63-0574009	
Alabama Digestive Health Endoscopy Center, L.L.C. Alabama, Limited Liability Company, FEIN 20-1243484	
Brookwood Home Health, LLC Alabama, Limited Liability Company, FEIN 46-0823659	
BWP Associates, Ltd. Alabama, Limited Partnership, FEIN 63-1086982	
C.K. of Birmingham, LLC Alabama, Limited Liability Company, FEIN 20-4756005	
Hoover Doctors Group, Inc. Alabama, Corporation, FEIN 63-0901230	
Medplex Outpatient Medical Centers, Inc. Alabama, Corporation, FEIN 75-2526707	
Brookwood Development, Inc. Alabama, Corporation, FEIN 76-0372916	
Alabama Health Services (St. Clair), L.L.C. Alabama, Limited Liability Company, FEIN 63-1146531	
BWP Associates, Ltd. Alabama, Limited Partnership, FEIN 63-1086982	
Brookwood Health Services, Inc. Alabama, Corporation, FEIN 63-0574010	
Amisub of Texas, Inc. Delaware, Corporation, FEIN 51-0337655	
Brookwood Garages, L.L.C. Alabama, Limited Liability Company, FEIN 26-2006443	
Coastal Carolina Medical Center, Inc. South Carolina, Corporation, FEIN 30-0151925	
Coastal Carolina Pro Fee Billing, L.L.C. South Carolina, Limited Liability Company, FEIN 27-0439624	
Coastal Carolina Physician Practices, L.L.C. Delaware, Limited Liability Company, FEIN 20-4968658	
Hardeeville Medical Group, L.L.C. South Carolina, Limited Liability Company, FEIN 80-0763568	
Hardeeville Primary Care, L.L.C. South Carolina, Limited Liability Company, FEIN 45-2956203	
Cumming Medical Ventures, Inc. Georgia, Corporation, FEIN 95-4200398	
East Cooper Community Hospital, Inc. South Carolina, Corporation, FEIN 95-3931540	
The Southeastern Spine Institute Ambulatory Surgery Center, L.L.C. South Carolina, Limited Liability Company, FEIN 20-8037589	
Eastern Professional Properties, Inc. Delaware, Corporation, FEIN 95-3565201	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Frye Regional Medical Center, Inc.</b> North Carolina, Corporation, FEIN 56-0852342	
<b>Frye Heart Excellence Team, LLC</b> North Carolina, Limited Liability Company, FEIN 46-2238593	
<b>FryeCare Outpatient Imaging, L.L.C.</b> North Carolina, Limited Liability Company, FEIN 20-3470670	
<b>FryeCare Physicians, L.L.C. (INACTIVE)</b> North Carolina, Limited Liability Company, FEIN 20-8148700	
<b>Guardian Health Service, L.L.C.</b> North Carolina, Limited Liability Company, FEIN 75-2950776	
<b>Piedmont Health Alliance, Inc.</b> North Carolina, Corporation, FEIN 75-2521553	
<b>Tate Surgery Center, L.L.C.</b> North Carolina, Limited Liability Company, FEIN 20-1133515	
<b>Unifour Neurosurgery, L.L.C.</b> North Carolina, Limited Liability Company, FEIN 20-8148614	
<b>Viewmont Surgery Center, L.L.C.</b> North Carolina, Limited Liability Company, FEIN 20-1133583	
<b>HUG Services, Inc.</b> Delaware, Corporation, FEIN 62-1260528	
<b>Magnetic Resonance Imaging of San Luis Obispo, Inc.</b> California, Corporation, FEIN 45-4340567	
<b>Tenet Investments, Inc.</b> Nevada, Corporation, FEIN 75-2775157	
<b>Tenet Central Carolina Physicians, Inc.</b> North Carolina, Corporation, FEIN 75-2815052	
<b>Physician Performance Network, L.L.C.</b> Delaware, Limited Liability Company, FEIN 45-4185151	
<b>Physician Performance Network of Georgia, L.L.C.</b> Georgia, Limited Liability Company, FEIN 80-0779774	
<b>Physician Performance Network of Philadelphia, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 38-3901053	
<b>Professional Healthcare Systems Licensing Corporation</b> Delaware, Corporation, FEIN 95-4262442	
<b>Tenet Finance Corp.</b> Delaware, Corporation, FEIN 51-0355391	
<b>Tenet HealthSystem Nacogdoches ASC LP, Inc.</b> Delaware, Corporation, FEIN 75-2793440	
<b>NMC Lessor, L.P.</b> Texas, Limited Partnership, FEIN 75-2803840	
<b>NMC Surgery Center, L.P.</b> Texas, Limited Partnership, FEIN 75-2793512	
<b>Tenet Ventures, Inc.</b> Delaware, Corporation, FEIN 46-1046879	
<b>Palm Beach Gardens Community Hospital, Inc.</b> Florida, Corporation, FEIN 59-1223933	
<b>Palm Beach Gardens Cardiac and Vascular Partners, LLC</b> Florida, Limited Liability Company, FEIN 46-3305145	
<b>Tenet Good Samaritan, Inc.</b> Florida, Corporation, FEIN 75-2932824	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**Good Samaritan Cardiac & Vascular Management, LLC**  
Florida, Limited Liability Company, FEIN 46-3305057

**Good Samaritan Surgery, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-1014755

**Tenet Florida Physician Services, L.L.C.**  
Florida, Limited Liability Company, FEIN 20-5733575

**Center for Advanced Research Excellence, L.L.C.**  
Florida, Limited Liability Company, FEIN 80-0929887

**Sunrise Medical Group I, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-0890405

**Sunrise Medical Group II, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-0890616

**Sunrise Medical Group III, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-0890888

**Sunrise Medical Group IV, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-0891128

**Sunrise Medical Group V, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-0891515

**Sunrise Medical Group VI, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-2980856

**Tenet Florida Physician Services II, L.L.C.**  
Florida, Limited Liability Company, FEIN 36-4727660

**Tenet Florida Physician Services III, L.L.C.**  
Florida, Limited Liability Company, FEIN 46-0910177

**Tenet Healthcare - Florida, Inc.**  
Florida, Corporation, FEIN 95-4562198

**Tenet HealthSystem North Shore, Inc.**  
Florida, Corporation, FEIN 75-2671592

**North Shore Medical Billing Center, L.L.C.**  
Florida, Limited Liability Company, FEIN 45-2861363

**North Shore Physician Practices, L.L.C.**  
Florida, Limited Liability Company, FEIN 26-1103241

**Tenet St. Mary's, Inc.**  
Florida, Corporation, FEIN 75-2932830

**The Heart and Vascular Clinic, L.L.C.**  
Florida, Limited Liability Company, FEIN 26-0552242

**Tenet West Palm Real Estate, Inc.**  
Florida, Corporation, FEIN 75-2939489

**Flagler Waterview, Ltd.**  
Florida, Limited Partnership, FEIN 65-0648902

**G.S. North, Ltd.**  
Florida, Limited Partnership, FEIN 65-0379158

**Tenet HealthSystem Nacogdoches ASC GP, Inc.**  
Texas, Corporation, FEIN 75-2793734

**NMC Surgery Center, L.P.**  
Texas, Limited Partnership, FEIN 75-2793512

**North Fulton Medical Center, Inc.**  
Georgia, Corporation, FEIN 95-3616310

**North Fulton GI Center, L.L.C.**  
Georgia, Limited Liability Company, FEIN 45-1351758

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Rock Bridge Surgical Institute, L.L.C. (INACTIVE)</b> Georgia, Limited Liability Company, FEIN 20-8627908	
<b>Roswell Georgia Surgery Center, L.L.C.</b> Georgia, Limited Liability Company, FEIN 20-5327664	
<b>North Fulton MOB Ventures, Inc.</b> Georgia, Corporation, FEIN 95-4200394	
<b>North Fulton Professional Building I, L.P.</b> Georgia, Limited Partnership, FEIN 58-1818010	
<b>Roswell Medical Ventures, Inc.</b> Georgia, Corporation, FEIN 95-4200392	
<b>Tenet HealthSystem GB, Inc.</b> Georgia, Corporation, FEIN 58-2329008	
<b>AMC Community Physician Practices, L.L.C.</b> Georgia, Limited Liability Company, FEIN 26-1103344	
<b>Atlanta Medical Billing Center, L.L.C.</b> Georgia, Limited Liability Company, FEIN 45-2886957	
<b>Tenet South Fulton Health Care Centers, Inc.</b> Delaware, Corporation, FEIN 75-2947587	
<b>Sheffield Educational Fund, Inc.</b> Georgia, Corporation, FEIN 58-1901860	
<b>Tenet HealthSystem SGH, Inc.</b> Georgia, Corporation, FEIN 75-2710726	
<b>Tenet HealthSystem Spalding, Inc.</b> Georgia, Corporation, FEIN 95-3948391	
<b>Griffin Imaging, LLC</b> Georgia, Limited Liability Company, FEIN 31-1828673	
<b>Spalding GI, L.L.C.</b> Georgia, Limited Liability Company, FEIN 20-4718094	
<b>Spalding Health System, L.L.C.</b> Georgia, Limited Liability Company, FEIN 58-2148398	
<b>Spalding Medical Ventures, L.P.</b> Georgia, Limited Partnership,	
<b>Tenet EMS/Spalding 911, LLC</b> Georgia, Limited Liability Company, FEIN 75-2774521	
<b>Tenet HealthSystem Bartlett, Inc.</b> Tennessee, Corporation, FEIN 75-2804737	
<b>Piedmont Urgent Care and Industrial Health Centers, Inc.</b> South Carolina, Corporation, FEIN 75-2939562	
<b>Catawba-Piedmont Cardiothoracic Surgery, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-4223022	
<b>Imaging Center at Baxter Village, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-2771596	
<b>Piedmont Behavioral Medicine Associates, LLC</b> South Carolina, Limited Liability Company, FEIN 26-0361481	
<b>Piedmont Cardiovascular Physicians, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-5444272	
<b>Piedmont Carolina OB/GYN of York County, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-2463315	
<b>Piedmont Carolina Vascular Surgery, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-3840876	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

<b>Piedmont East Urgent Care Center, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 75-2940368
<b>Piedmont Express Care at Sutton Road, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 46-3106748
<b>Piedmont Family Practice at Baxter Village, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 46-3110292
<b>Piedmont Family Practice at Rock Hill, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-1691307
<b>Piedmont Family Practice at Tega Cay, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-4896825
<b>Piedmont General Surgery Associates, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 45-2955964
<b>Piedmont Internal Medicine and Family Practice at York, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-2771779
<b>Piedmont Internal Medicine at Baxter Village, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-4896761
<b>Piedmont Pulmonology, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-1869396
<b>Piedmont Surgical Specialists, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-3364626
<b>Piedmont Urgent Care Center at Baxter Village, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 75-2940323
<b>Piedmont West Urgent Care Center, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 75-2835629
<b>South Carolina Health Services, Inc.</b> South Carolina, Corporation, FEIN 75-2533276
<b>Bluffton Okatie Primary Care, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-0429802
<b>Broad River Primary Care, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-0303778
<b>Burnt Church Primary and Urgent Care, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-8549880
<b>Cardiovascular &amp; Thoracic Surgery Associates, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-8774785
<b>Heritage Medical Group of Hilton Head, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 45-5057974
<b>Hilton Head Occupational Medicine, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-3631069
<b>Hilton Head Regional Anesthesia Partners, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-0698308
<b>Hilton Head Regional Endocrinology Associates, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-1672550
<b>Hilton Head Regional OB/GYN Partners, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-0698372
<b>Mid-Island Primary and Urgent Care, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 20-8668425
<b>Nephrology Associates of Hilton Head, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 45-5058169
<b>Okatie Surgical Partners, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-3776567

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Oncology Associates of the Low Country, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 46-3389781	
<b>Orthopedic Associates of the Lowcountry, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-0698456	
<b>Tenet Hilton Head Heart, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 45-1151539	
<b>Tenet South Carolina Lowcountry OB/GYN, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-0662727	
<b>Tenet DISC Imaging, Inc.</b> South Carolina, Corporation, FEIN 57-0955701	
<b>Tenet Physician Services - Hilton Head, Inc.</b> South Carolina, Corporation, FEIN 75-2536849	
<b>Hilton Head Health System, L.P.</b> South Carolina, Limited Partnership, FEIN 75-2550947	
<b>Tenet HealthSystem SL, Inc.</b> Missouri, Corporation, FEIN 75-2732072	
<b>SLUH Anesthesia Physicians, L.L.C.</b> Missouri, Limited Liability Company, FEIN 45-2653015	
<b>Tenet SLUH Physicians, L.L.C.</b> Missouri, Limited Liability Company, FEIN 20-1957741	
<b>Tenet HealthSystem SL-HLC, Inc.</b> Missouri, Corporation, FEIN 75-274474	
<b>Concentra St. Louis, L.L.C.</b> Delaware, Limited Liability Company, FEIN 75-2821236	
<b>Tenet HealthSystem Philadelphia, Inc.</b> Pennsylvania, Corporation, FEIN 75-2782341	
<b>HPS of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 46-3301617	
<b>MidAtlantic MedEvac, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 20-4381056	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>Tenet HealthSystem Bucks County, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784877	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>Tenet HealthSystem City Avenue, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784878	
<b>Tenet HealthSystem Elkins Park, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784875	
<b>Tenet HealthSystem Graduate, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784863	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>Tenet HealthSystem Hahnemann, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784869	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>Tenet HealthSystem Parkview, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784879	

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Tenet Healthcare Corporation Subsidiaries	
<b>Tenet HealthSystem Roxborough MOB, LLC</b> Pennsylvania, Limited Liability Company, FEIN 55-0813345	
<b>Tenet HealthSystem Roxborough, LLC</b> Pennsylvania, Limited Liability Company, FEIN 16-1630516	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>Tenet HealthSystem St. Christopher's Hospital for Children, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784866	
<b>Center for the Urban Child, Inc.</b> Pennsylvania, Corporation, FEIN 46-1577622	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>SCHC Pediatric Anesthesia Associates, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 26-4472326	
<b>St. Christopher's Pediatric Urgent Care Center - Allentown, L.L.C</b> Pennsylvania, Limited Liability Company, FEIN 46-0665910	
<b>SCHC Pediatric Associates, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2870527	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>St. Christopher's Pediatric Urgent Care Center, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 45-4656447	
<b>StChris Care at Northeast Pediatrics, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 20-5474056	
<b>Tenet Home Services, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2848692	
<b>Tenet Medical Equipment Services, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2848690	
<b>TPS of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2784862	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>TPS II of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2835534	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>TPS III of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2835536	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>TPS IV of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2835537	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>TPS V of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 75-2835540	
<b>The Healthcare Underwriting Company, A Risk Retention Group</b> Vermont, Corporation, FEIN 20-2837805	
<b>TPS VI of PA, L.L.C.</b> Pennsylvania, Limited Liability Company, FEIN 20-4872610	

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Tenet Healthcare Corporation Subsidiaries	
Tenet HealthSystem Hospitals, Inc. Delaware, Corporation, FEIN 95-3720659	
Alvarado Hospital Medical Center, Inc. California, Corporation, FEIN 75-2902649	
Anaheim MRI Holding, Inc. (INACTIVE) California, Corporation, FEIN 75-2918766	
Community Hospital of Los Gatos, Inc. California, Corporation, FEIN 75-2918886	
Los Gatos Multi-Specialty Group, Inc. California, Corporation, FEIN 20-3912182	
Delray Medical Center, Inc. (INACTIVE) Florida, Corporation, FEIN 75-2922687	
Doctors Hospital of Manteca, Inc. (INACTIVE) California, Corporation, FEIN 75-2918966	
Doctors Medical Center of Modesto, Inc. California, Corporation, FEIN 75-2918774	
Modesto On-Call Services, L.L.C. California, Limited Liability Company, FEIN 20-4779732	
Modesto Radiology Imaging, Inc. California, Corporation, FEIN 45-1153749	
Yosemite Medical Clinic, Inc. California, Corporation, FEIN 20-2108216	
Hollywood Medical Center, Inc. Florida, Corporation, FEIN 75-2922705	
JFK Memorial Hospital, Inc. California, Corporation, FEIN 75-2919774	
SSC Holdings, L.L.C. California, Limited Liability Company, FEIN 47-0887316	
Lakewood Regional Medical Center, Inc. (INACTIVE) California, Corporation, FEIN 75-2919841	
Los Alamitos Medical Center, Inc. California, Corporation, FEIN 75-2919839	
Reagan Street Surgery Center, LLC California, Limited Liability Company, FEIN 20-1484668	
National Medical Services II, Inc. (INACTIVE) Florida, Corporation, FEIN 75-2714377	
National Medical Ventures, Inc. Delaware, Corporation, FEIN 95-3964600	
Placentia-Linda Hospital, Inc. California, Corporation, FEIN 75-2918773	
Anaheim Hills Medical Imaging, L.L.C. California, Limited Liability Company, FEIN 27-3645722	
Tenet California Medical Ventures I, Inc. (INACTIVE) California, Corporation, FEIN 95-4572788	
Tenet California Nurse Resources, Inc. (INACTIVE) California, Corporation, FEIN 71-0882573	
Tenet El Mirador Surgical Center, Inc. (INACTIVE) California, Corporation, FEIN 75-2720353	
Tenet HealthSystem Desert, Inc. (INACTIVE) California, Corporation, FEIN 75-2694137	

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PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**Twin Cities Community Hospital, Inc.**  
California, Corporation, FEIN 75-2918765

**Templeton Imaging, Inc.**  
California, Corporation, FEIN 45-0828574

**Tenetsub Texas, Inc.**  
Delaware, Corporation, FEIN 95-4537718

**Eastside Surgery, L.P.**  
Texas, Limited Partnership, FEIN 20-3248887

**Practice Partners Management, L.P.**  
Texas, Limited Partnership, FEIN 20-4525331

**Tenet El Paso, Ltd.**  
Texas, Limited Partnership, FEIN 20-3761682

**Tenet Hospitals Limited**  
Texas, Limited Partnership, FEIN 95-4537720

**Billing Center Doctors Hospital at White Rock Lake, L.L.C.**  
Texas, Limited Liability Company, FEIN 45-2861076

**Tenet Sun View Imaging, L.L.C.**  
New Mexico, Limited Liability Company, FEIN 27-3531596

**PDN, L.L.C.**  
Texas, Limited Liability Company, FEIN 27-3607576

**Surgery Affiliate of El Paso, LLC**  
Texas, Limited Liability Company, FEIN 74-2797719

**Tenet Hialeah HealthSystem, Inc.**  
Florida, Corporation, FEIN 75-2653770

**Hialeah Real Properties, Inc.**  
Florida, Corporation, FEIN 75-2653767

**Tenet Hialeah (ASC) HealthSystem, Inc.**  
Florida, Corporation, FEIN 75-2653774

**West Boca Medical Center, Inc.**  
Florida, Corporation, FEIN 75-2922710

**West Boca Health Services, L.L.C.**  
Florida, Limited Liability Company, FEIN 46-2592532

**Tenet HealthSystem DI, Inc.**  
Missouri, Corporation, FEIN 75-2695810

**Bridgeton Imaging, L.L.C.**  
Missouri, Limited Liability Company, FEIN 27-4240354

**Premier Emergency Physicians, LLC (INACTIVE)**  
Missouri, Limited Liability Company, FEIN 20-1951199

**Premier Medical Specialists, L.L.C. (INACTIVE)**  
Missouri, Limited Liability Company, FEIN 26-0513329

**U.S. Center for Sports Medicine, LLC**  
Missouri, Limited Liability Company, FEIN 20-0244655

**Tenet Hospitals, Inc.**  
Delaware, Corporation, FEIN 51-0434231

**National ASC, Inc.**  
Delaware, Corporation, FEIN 45-2641885

**Tenet Alabama, Inc.**  
Delaware, Corporation, FEIN 20-3117792

**Brookwood Primary Network Care, Inc.**  
Alabama, Corporation, FEIN 20-5771598

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PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**Alabama Cardiovascular Associates, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2970071

**Alabama Hand and Sports Medicine, L.L.C.**  
Alabama, Limited Liability Company, FEIN 32-0415234

**Brookwood - Maternal Fetal Medicine, L.L.C.**  
Alabama, Limited Liability Company, FEIN 26-0900151

**Brookwood Medical Partners - ENT, L.L.C.**  
Alabama, Limited Liability Company, FEIN 80-0844328

**Brookwood Occupational Health Clinic, L.L.C.**  
Alabama, Limited Liability Company, FEIN 27-3801567

**Brookwood Primary Care - Homewood, L.L.C.**  
Alabama, Limited Liability Company, FEIN 35-2453147

**Brookwood Primary Care - Inverness, L.L.C.**  
Alabama, Limited Liability Company, FEIN 90-0953201

**Brookwood Primary Care - Mountain Brook, L.L.C.**  
Alabama, Limited Liability Company, FEIN 61-1694365

**Brookwood Primary Care - Oak Mountain, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2700081

**Brookwood Primary Care - Red Mountain, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2697306

**Brookwood Primary Care - Trussville, L.L.C.**  
Alabama, Limited Liability Company, FEIN 26-1150449

**Brookwood Primary Care - Vestavia, L.L.C.**  
Alabama, Limited Liability Company, FEIN 27-3654887

**Brookwood Primary Care Cahaba Heights, L.L.C.**  
Alabama, Limited Liability Company, FEIN 26-0581338

**Brookwood Primary Care Hoover, L.L.C.**  
Alabama, Limited Liability Company, FEIN 26-0582341

**Brookwood Primary Care Network - McCalla, L.L.C.**  
Alabama, Limited Liability Company, FEIN 27-3801619

**Brookwood Primary Care The Narrows, L.L.C.**  
Alabama, Limited Liability Company, FEIN 26-0582424

**Brookwood Specialty Care - Endocrinology, L.L.C.**  
Alabama, Limited Liability Company, FEIN 61-1707462

**Brookwood Women's Care, L.L.C.**  
Alabama, Limited Liability Company, FEIN 27-3907736

**Cardiovascular Associates of the Southeast, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2697154

**Greystone Internal Medicine - Brookwood, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2697246

**Norwood Clinic of Alabama, L.L.C.**  
Alabama, Limited Liability Company, FEIN 45-2697058

**Brookwood Retail Pharmacy, L.L.C.**  
Alabama, Limited Liability Company, FEIN 32-0372276

**Tenet California, Inc.**  
Delaware, Corporation, FEIN 04-3715488

**Anaheim MRI Holding, Inc.**  
California, Corporation, FEIN 75-2918766

**Community Hospital of Los Gatos, Inc.**  
California, Corporation, FEIN 75-2918886

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Tenet Healthcare Corporation

Subsidiaries

**Doctors Hospital of Manteca, Inc.**  
California, Corporation, FEIN 75-2918966

**Doctors Medical Center of Modesto, Inc.**  
California, Corporation, FEIN 75-2918774

**JFK Memorial Hospital, Inc.**  
California, Corporation, FEIN 75-2919774

**Lakewood Regional Medical Center, Inc.**  
California, Corporation, FEIN 75-2919841

**Los Alamitos Medical Center, Inc.**  
California, Corporation, FEIN 75-2919839

**Placentia-Linda Hospital, Inc.**  
California, Corporation, FEIN 75-2918773

**San Ramon ASC, L.P.**  
California, Limited Partnership, FEIN 75-2786926

**San Ramon Surgery Center, L.L.C.**  
California, Limited Liability Company, FEIN 75-2788026

**San Ramon ASC, L.P.**  
California, Limited Partnership, FEIN 75-2786926

**Tenet California Medical Ventures I, Inc.**  
California, Corporation, FEIN 95-4572788

**Tenet California Nurse Resources, Inc.**  
California, Corporation, FEIN 71-0882573

**Tenet El Mirador Surgical Center, Inc.**  
California, Corporation, FEIN 75-2720353

**Tenet HealthSystem Desert, Inc.**  
California, Corporation, FEIN 75-2694137

**Tenet HealthSystem KNC, Inc.**  
California, Corporation, FEIN 75-3085890

**Twin Cities Community Hospital, Inc.**  
California, Corporation, FEIN 75-2918765

**PHPS-CHM Acquisition, Inc.**  
Delaware, Corporation, FEIN 46-2518840

**SRRMC Management, Inc.**  
Delaware, Corporation, FEIN 46-2176094

**San Ramon Regional Medical Center, LLC**  
Delaware, Limited Liability Company, FEIN 75-2918809

**Pleasanton Diagnostic Imaging, Inc.**  
California, Corporation, FEIN 45-1497338

**Tenet Florida, Inc.**  
Delaware, Corporation, FEIN 35-2194914

**Delray Medical Center, Inc.**  
Florida, Corporation, FEIN 75-2922687

**Florida Regional Medical Center, Inc.**  
Florida, Corporation, FEIN 45-2777650

**National Medical Services II, Inc.**  
Florida, Corporation, FEIN 75-2714377

**National Urgent Care, Inc.**  
Florida, Corporation, FEIN 20-2909749

**Tenet Florida Physician Services, L.L.C.**  
Florida, Limited Liability Company, FEIN 20-5733575

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Tenet Healthcare Corporation Subsidiaries	
Tenet Hialeah HealthSystem, Inc. Florida, Corporation, FEIN 75-2653770	
Tenet Network Management, Inc. Florida, Corporation, FEIN 75-2662581	
West Boca Medical Center, Inc. Florida, Corporation, FEIN 75-2922710	
Tenet Georgia, Inc. Delaware, Corporation, FEIN 20-0148165	
AMC Neurosurgical Associates, L.L.C. Georgia, Limited Liability Company, FEIN 27-3545890	
Atlanta Medical Center Interventional Neurology Associates, L.L.C. Georgia, Limited Liability Company, FEIN 30-0726122	
Atlanta Medical Center Neurosurgical & Spine Specialists, L.L.C. Georgia, Limited Liability Company, FEIN 90-0779157	
Atlanta Medical Center Physician Group, L.L.C. Georgia, Limited Liability Company, FEIN 90-1009003	
Buckhead Orthopedic Surgery Center, L.L.C. Georgia, Limited Liability Company, FEIN 45-2977438	
Gastric Health Institute, L.L.C. Georgia, Limited Liability Company, FEIN 26-3216365	
Georgia Gifts From Grace, L.L.C. Georgia, Limited Liability Company, FEIN 45-3192789	
Georgia North Fulton Healthcare Associates, L.L.C. Georgia, Limited Liability Company, FEIN 45-2234224	
Georgia Northside Ear, Nose and Throat, L.L.C. Georgia, Limited Liability Company, FEIN 80-0913034	
Georgia Spectrum Neurosurgical Specialists, L.L.C. Georgia, Limited Liability Company, FEIN 45-3192933	
Jackson Medical Associates, LLC Georgia, Limited Liability Company, FEIN 20-2928771	
North Fulton Cardiovascular Medicine, L.L.C. Georgia, Limited Liability Company, FEIN 37-1711612	
North Fulton Hospitalist Group, L.L.C. Georgia, Limited Liability Company, FEIN 90-0771877	
North Fulton Primary Care - Windward Parkway, L.L.C. Georgia, Limited Liability Company, FEIN 26-3988064	
North Fulton Primary Care - Wylie Bridge, L.L.C. Georgia, Limited Liability Company, FEIN 36-4757629	
North Fulton Primary Care Associates, L.L.C. Georgia, Limited Liability Company, FEIN 26-3216318	
North Fulton Pulmonary Specialists, L.L.C. Georgia, Limited Liability Company, FEIN 45-2885337	
North Fulton Regional Medical Center Pro Fee Billing, L.L.C. Georgia, Limited Liability Company, FEIN 26-4807653	
North Fulton Women's Consultants, L.L.C. Georgia, Limited Liability Company, FEIN 27-3762185	
Northwoods Member, Inc. Georgia, Corporation, FEIN 75-2833795	
Rheumatology Associates of Atlanta Medical Center, L.L.C. Georgia, Limited Liability Company, FEIN 45-2798002	

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Tenet Healthcare Corporation  
Subsidiaries

**Rock Bridge Surgical Institute, L.L.C.**  
Georgia, Limited Liability Company, FEIN 20-8627908

**South Fulton Regional Medical Center Pro Fee Billing, L.L.C.**  
Georgia, Limited Liability Company, FEIN 26-4807784

**SouthCare Physicians Group Neurology, L.L.C.**  
Georgia, Limited Liability Company, FEIN 26-424534

**SouthCare Physicians Group Obstetrics & Gynecology, L.L.C.**  
Georgia, Limited Liability Company, FEIN 26-1293960

**Spalding Regional Ambulatory Surgery Center, L.L.C.**  
Georgia, Limited Liability Company, FEIN 45-2977375

**Spalding Regional OB/GYN, L.L.C.**  
Georgia, Limited Liability Company, FEIN 27-5218811

**Spalding Regional Physician Services, L.L.C.**  
Georgia, Limited Liability Company, FEIN 20-8710648

**Spalding Regional Urgent Care Center at Heron Bay, L.L.C.**  
Georgia, Limited Liability Company, FEIN 20-8444583

**Surgical & Bariatric Associates of Atlanta Medical Center, L.L.C.**  
Georgia, Limited Liability Company, FEIN 45-2798160

**Tenet Louisiana, Inc.**  
Delaware, Corporation, FEIN 14-1852797

**Meadowcrest Hospital, LLC**  
Louisiana, Limited Liability Company, FEIN 20-0099898

**Meadowcrest Multi-Specialty Clinic, L.L.C.**  
Louisiana, Limited Liability Company, FEIN 20-4872555

**Tenet 100 Medical Center Slidell, L.L.C.**  
Louisiana, Limited Liability Company, FEIN 20-0099838

**Tenet HealthSystem Memorial Medical Center, Inc.**  
Louisiana, Corporation, FEIN 95-4541362

**Tenet Mid-City Medical, L.L.C.**  
Louisiana, Limited Liability Company, FEIN 32-0073469

**Tenet Missouri, Inc.**  
Delaware, Corporation, FEIN 61-1442003

**Cedar Hill Primary Care, L.L.C.**  
Missouri, Limited Liability Company, FEIN 45-3718907

**Premier Emergency Physicians, LLC**  
Missouri, Limited Liability Company, FEIN 20-1951199

**Premier Medical Specialists, L.L.C.**  
Missouri, Limited Liability Company, FEIN 26-0513329

**St. Louis University Hospital Ambulatory Surgery Center, L.L.C.**  
Missouri, Limited Liability Company, FEIN 45-3069045

**Tenet HealthSystem DI, Inc.**  
Missouri, Corporation, FEIN 75-2695810

**Tenet North Carolina, Inc.**  
Delaware, Corporation, FEIN 61-1441811

**Cardiology Physicians Associates, L.L.C.**  
North Carolina, Limited Liability Company, FEIN 45-2807392

**Cardiology Physicians Corporation, L.L.C.**  
North Carolina, Limited Liability Company, FEIN 27-3767815

**Central Carolina Hospital Pro Fee Billing, L.L.C.**  
North Carolina, Limited Liability Company, FEIN 26-4810347

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Tenet Healthcare Corporation Subsidiaries	
<b>Central Carolina Physicians - Sandhills, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 46-2890250
<b>Frye Physicians - Tenet NC, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4333135
<b>FryeCare Appalachian, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 46-2516841
<b>FryeCare Boone, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 46-1056454
<b>FryeCare Morganton, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 45-4353612
<b>FryeCare Northwest Hickory, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 46-2886137
<b>FryeCare Physicians, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 20-8148700
<b>FryeCare Valdese, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4372367
<b>FryeCare Watauga, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 46-2605132
<b>FryeCare Women's Services, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-3586858
<b>Graystone Family Healthcare - Tenet North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4332351
<b>Hallmark Family Physicians - Tenet North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4332637
<b>Healthpoint of North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 20-3629887
<b>Hickory Family Practice Associates - Tenet North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4332441
<b>North Carolina Community Family Medicine, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 45-2977553
<b>Parkway Internal Medicine - Tenet North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-4372266
<b>Tenet Claremont Family Medicine, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 75-2841283
<b>Tenet Unifour Urgent Care Center, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 75-2841284
<b>Viewmont Internal Medicine - Tenet North Carolina, L.L.C.</b>	North Carolina, Limited Liability Company, FEIN 27-5413994
<b>Tenet South Carolina, Inc.</b>	Delaware, Corporation, FEIN 35-2195390
<b>East Cooper Coastal Family Physicians, L.L.C.</b>	South Carolina, Limited Liability Company, FEIN 26-4810484
<b>Hilton Head Hospital Pro Fee Billing, L.L.C.</b>	South Carolina, Limited Liability Company, FEIN 26-4805244
<b>Hilton Head Regional Healthcare, L.L.C.</b>	South Carolina, Limited Liability Company, FEIN 27-2867245
<b>South Carolina East Cooper Surgical Specialists, L.L.C.</b>	South Carolina, Limited Liability Company, FEIN 45-3530629
<b>South Carolina SeWee Family Medicine, L.L.C.</b>	South Carolina, Limited Liability Company, FEIN 45-2955910

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Tenet Healthcare Corporation Subsidiaries	
<b>Southern Orthopedics and Sports Medicine, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-2563960	
<b>Tenet Fort Mill, Inc.</b> South Carolina, Corporation, FEIN 20-1951154	
<b>Tenet SC East Cooper Hospitalists, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 26-4807548	
<b>Tenet South Carolina Gastrointestinal Surgical Specialists, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-3768497	
<b>Tenet South Carolina Island Medical, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-2249850	
<b>Tenet South Carolina Mt. Pleasant OB/GYN, L.L.C.</b> South Carolina, Limited Liability Company, FEIN 27-2288803	
<b>Tenet Tennessee, Inc.</b> Delaware, Corporation, FEIN 32-0068573	
<b>Saint Francis Behavioral Health Assocites, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 45-4978159	
<b>Saint Francis Cardiology Associates, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 45-2403870	
<b>Saint Francis Cardiovascular Surgery, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 45-2405009	
<b>Saint Francis Center for Surgical Weight Loss, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 27-3249536	
<b>Saint Francis Hospital Inpatient Physicians, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 27-3646746	
<b>Saint Francis Hospital Pro Fee Billing, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 27-0735194	
<b>Saint Francis Medical Partners, East, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 27-3248961	
<b>Saint Francis Medical Specialists, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 45-5499140	
<b>Saint Francis Surgical Associates, L.L.C.</b> Tennessee, Limited Liability Company, FEIN 45-4302604	
<b>Tenet Texas, Inc.</b> Delaware, Corporation, FEIN 30-0147897	
<b>Eastside ASC GP, Inc.</b> Texas, Corporation, FEIN 20-3248821	
<b>Eastside Surgery, L.P.</b> Texas, Limited Partnership, FEIN 20-3248887	
<b>EPHC, Inc.</b> Texas, Corporation, FEIN 20-35222951	
<b>Houston Sunrise Investors, Inc.</b> Delaware, Corporation, FEIN 20-3290068	
<b>Tenet HealthSystem Hospitals Dallas, Inc.</b> Delaware, Corporation, FEIN 51-0356658	
<b>Tenetsub Texas, Inc.</b> Delaware, Corporation, FEIN 95-4537718	
<b>Practice Partners Management, L.P.</b> Texas, Limited Partnership, FEIN 20-4525331	
<b>Sierra Providence Health Network, Inc.</b> Texas, Corporation, FEIN 74-2728378	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation Subsidiaries	
<b>Tenet El Paso, Ltd.</b> Texas, Limited Partnership, FEIN 20-3761682	
<b>Tenet Hospitals Limited</b> Texas, Limited Partnership, FEIN 95-4537720	
<b>Tenet Relocation Services, L.L.C.</b> Texas, Limited Liability Company, FEIN 26-1691535	
<b>Total Health PPO, Inc.</b> Texas, Corporation, FEIN 26-4682368	
<b>TenetCare, Inc.</b> Delaware, Corporation, FEIN 73-1628071	
<b>National Diagnostic Imaging Centers, Inc.</b> Texas, Corporation, FEIN 45-3068928	
<b>TenetCare Frisco, Inc.</b> Texas, Corporation, FEIN 38-3674035	
<b>TenetCare Tennessee, Inc.</b> Tennessee, Corporation, FEIN 30-0146669	
<b>Wilshire Rental Corp.</b> Delaware, Corporation, FEIN 95-4107146	
<b>Hitchcock State Street Real Estate, Inc.</b> California, Corporation, FEIN 47-0874891	
<b>Vanguard Health Systems, Inc.</b> Delaware, Corporation, FEIN 62-1698183	
<b>Vanguard Health Holding Company I, LLC</b> Delaware, Limited Liability Company, FEIN 27-1776565	
<b>Vanguard Health Holding Company II, LLC</b> Delaware, Limited Liability Company, FEIN 27-1776657	
<b>Vanguard Health Management, Inc.</b> Delaware, Corporation, FEIN 62-1686886	
<b>Harbor Health Plan, Inc.</b> Michigan, Corporation, FEIN 38-3295207	
<b>Healthcare Compliance, LLC</b> District of Columbia, Limited Liability Company, FEIN 52-2033964	
<b>New Dimensions, LLC</b> Illinois, Limited Liability Company, FEIN 45-5435130	
<b>Vanguard Health Financial Company, LLC</b> Delaware, Limited Liability Company, FEIN 62-1730470	
<b>C7 Technologies, LLC</b> Delaware, Limited Liability Company, FEIN 45-4307740	
<b>Central Texas Corridor Hospital Company, LLC</b> Delaware, Limited Liability Company, FEIN 27-1027456	
<b>Hospital Development of West Phoenix, Inc.</b> Delaware, Corporation, FEIN 62-1867232	
<b>MacNeal Management Services, Inc.</b> Illinois, Corporation, FEIN 36-3313638	
<b>Chicago Health System ACO, LLC</b> Illinois, Limited Liability Company, FEIN 45-3020116	
<b>MacNeal Health Providers, Inc.</b> Illinois, Corporation, FEIN 36-3361297	
<b>Midwest Pharmacies, Inc.</b> Illinois, Corporation, FEIN 36-4295667	

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**Primary Care Physicians Center, LLC**  
Illinois, Limited Liability Company, FEIN 36-4038505

**Pros Temporary Staffing, Inc.**  
Illinois, Corporation, FEIN 36-4339784

**Watermark Physician Services, Inc.**  
Illinois, Corporation, FEIN 36-4339782

**MacNeal Medical Records, Inc.**  
Delaware, Corporation, FEIN 62-1807248

**Resolute Hospital Company, LLC**  
Delaware, Limited Liability Company, FEIN 46-2942963

**Southwest Children's Hospital, LLC**  
Delaware, Limited Liability Company, FEIN 45-4597785

**Valley Baptist Insurance Company**  
Texas, Corporation, FEIN 20-3870730

**Vanguard IT Services, LLC**  
Delaware, Limited Liability Company, FEIN 45-5242604

**VHS Acquisition Corporation**  
Delaware, Corporation, FEIN 62-1730519

**VHS Acquisition Subsidiary Number 1, Inc.**  
Delaware, Corporation, FEIN 62-1861138

**VHS Acquisition Subsidiary Number 10, Inc.**  
Delaware, Corporation, FEIN 62-1861202

**VHS Acquisition Subsidiary Number 11, Inc.**  
Delaware, Corporation, FEIN 16-1633531

**VHS Acquisition Subsidiary Number 12, Inc.**  
Delaware, Corporation, FEIN 71-0906482

**VHS Acquisition Subsidiary Number 2, Inc.**  
Delaware, Corporation, FEIN 62-1861141

**VHS Acquisition Subsidiary Number 3, Inc.**  
Delaware, Corporation, FEIN 62-1861142

**LakeFront Medical Associates, LLC**  
Delaware, Limited Liability Company, FEIN 26-0869610

**VHS Acquisition Subsidiary Number 4, Inc.**  
Delaware, Corporation, FEIN 62-1861143

**VHS Acquisition Subsidiary Number 5, Inc.**  
Delaware, Corporation, FEIN 62-1861175

**VHS San Antonio Partners, LLC**  
Delaware, Limited Liability Company, FEIN 76-0714523

**Baptist Medical Management Service Organization, LLC**  
Delaware, Limited Liability Company, FEIN 26-0806536

**BHS Accountable Care, LLC**  
Delaware, Limited Liability Company, FEIN 45-4510162

**BHS Integrated Physician Partners, LLC**  
Delaware, Limited Liability Company, FEIN 45-4594479

**BHS Physicians Alliance for ACE, LLC**  
Delaware, Limited Liability Company, FEIN 46-0500964

**Home Health Partners of San Antonio, LLC**  
Texas, Limited Liability Company, FEIN 80-0631912

**Journey Home Healthcare of San Antonio, LLC**  
Texas, Limited Liability Company, FEIN 20-5445502

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**VHS Acquisition Subsidiary Number 6, Inc.**  
Delaware, Corporation, FEIN 62-1861197

**VHS Acquisition Subsidiary Number 7, Inc.**  
Delaware, Corporation, FEIN 62-1861198

**Total Accountable Care Organization, LLC**  
Delaware, Limited Liability Company, FEIN 45-4551090

**VHS Acquisition Subsidiary Number 8, Inc.**  
Delaware, Corporation, FEIN 62-1861199

**Advantage Health Care Management Company, LLC**  
Delaware, Limited Liability Company, FEIN 27-3503859

**Community Connection Health Plan, Inc.**  
Arizona, Corporation, FEIN 46-1981209

**VHS Acquisition Subsidiary Number 9, Inc.**  
Delaware, Corporation, FEIN 62-1861200

**MetroWest Accountable Health Care Organization, LLC**  
Massachusetts, Limited Liability Company, FEIN 27-3053216

**Total Accountable Care Organization, LLC**  
Delaware, Limited Liability Company, FEIN 45-4551090

**VHS Genesis Labs, Inc.**  
Delaware, Corporation, FEIN 62-1803765

**VHS Holding Company, Inc.**  
Delaware, Corporation, FEIN 62-1782796

**Resolute Health Family Urgent Care, Inc.**  
Delaware, Corporation, FEIN 45-3951101

**VHS San Antonio Partners, LLC**  
Delaware, Limited Liability Company, FEIN 76-0714523

**VHS Imaging Centers, Inc.**  
Delaware, Corporation, FEIN 62-1852828

**VHS New England Holding Company I, Inc.**  
Delaware, Corporation, FEIN 27-1283039

**VHS of Illinois, Inc.**  
Delaware, Corporation, FEIN 62-1796152

**MacNeal Physicians Group, LLC**  
Delaware, Limited Liability Company, FEIN 20-8779101

**Vanguard Medical Specialists, LLC**  
Delaware, Limited Liability Company, FEIN 45-4472564

**VHS Chicago Market Procurement, LLC**  
Delaware, Limited Liability Company, FEIN 72-1618786

**VHS of Michigan, Inc.**  
Delaware, Corporation, FEIN 27-2396331

**VHS Children's Hospital of Michigan, Inc.**  
Delaware, Corporation, FEIN 27-2845064

**VHS Detroit Businesses, Inc.**  
Delaware, Corporation, FEIN 27-2844877

**VHS Detroit Receiving Hospital, Inc.**  
Delaware, Corporation, FEIN 27-2844942

**VHS Detroit Ventures, Inc.**  
Delaware, Corporation, FEIN 27-2845150

**DMC Shared Savings ACO, LLC**  
Delaware, Limited Liability Company, FEIN 90-0857580

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation  
Subsidiaries

**VHS Harper-Hutzel Hospital, Inc.**  
Delaware, Corporation, FEIN 27-2844767

**VHS Huron Valley-Sinai Hospital, Inc.**  
Delaware, Corporation, FEIN 27-2844563

**VHS of Michigan Staffing, Inc.**  
Delaware, Corporation, FEIN 62-1867506

**VHS Rehabilitation Institute of Michigan, Inc.**  
Delaware, Corporation, FEIN 27-2844407

**VHS Sinai-Grace Hospital, Inc.**  
Delaware, Corporation, FEIN 27-2844632

**VHS University Laboratories, Inc.**  
Delaware, Corporation, FEIN 27-3176652

**VHS of Orange County, Inc.**  
Delaware, Corporation, FEIN 62-1770074

**VHS of Anaheim, Inc.**  
Delaware, Corporation, FEIN 62-1781813

**VHS of Huntington Beach, Inc.**  
Delaware, Corporation, FEIN 62-1782707

**VHS of Phoenix, Inc.**  
Delaware, Corporation, FEIN 62-1809851

**VHS Arizona Heart Institute, Inc.**  
Delaware, Corporation, FEIN 62-1867509

**VHS of Arrowhead, Inc.**  
Delaware, Corporation, FEIN 62-1811285

**VHS of South Phoenix, Inc.**  
Delaware, Corporation, FEIN 62-1842396

**Arizona Health Partners, LLC**  
Arizona, Limited Liability Company, FEIN 27-1218380

**Phoenix Health Plans, Inc.**  
Arizona, Corporation, FEIN 20-2706634

**VHS Phoenix Health Plan, LLC**  
Delaware, Limited Liability Company, FEIN 62-1831567

**VHS Outpatient Clinics, Inc.**  
Delaware, Corporation, FEIN 62-1816823

**Abrazo Medical Group Urgent Care, LLC**  
Delaware, Limited Liability Company, FEIN 20-8165423

**VHS Valley Management Company, Inc.**  
Delaware, Corporation, FEIN 45-2717211

**VHS Valley Health System, LLC**  
Delaware, Limited Liability Company, FEIN 45-2718392

**Valley Baptist Realty Company, LLC**  
Delaware, Limited Liability Company, FEIN 45-2718565

**VHS Brownsville Hospital Company, LLC**  
Delaware, Limited Liability Company, FEIN 45-2663071

**VHS Harlingen Hospital Company, LLC**  
Delaware, Limited Liability Company, FEIN 45-2662980

**VHS Valley Holdings, LLC**  
Delaware, Limited Liability Company, FEIN 45-2718651

**Valley Baptist Lab Services, LLC**  
Texas, Limited Liability Company, FEIN 55-0912886

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Tenet Healthcare Corporation	
Subsidiaries	
Valley Baptist Wellness Center, LLC	
Texas, Limited Liability Company, FEIN 55-0912883	
VB Brownsville IMP ASC, LLC	
Texas, Limited Liability Company, FEIN 01-0866394	
VB Brownsville LTACH, LLC	
Texas, Limited Liability Company, FEIN 14-1952472	
VBOA ASC GP, LLC	
Texas, Limited Liability Company, FEIN 13-4334601	
VHS West Suburban Medical Center, Inc.	
Delaware, Corporation, FEIN 27-2071328	
West Suburban Radiation Therapy Center, LLC	
Delaware, Limited Liability Company, FEIN Not Yet Applied	
VHS Westlake Hospital, Inc.	
Delaware, Corporation, FEIN 27-2071437	
V-II Acquisition Co., Inc.	
Pennsylvania, Corporation, FEIN 62-1730482	
Vanguard Physician Services, LLC	
Delaware, Limited Liability Company, FEIN 45-5494532	
Vanguard Holding Company II, Inc.	
Delaware, Corporation, FEIN 73-1714420	
Vanguard Holding Company I, Inc.	
Delaware, Corporation, FEIN 73-1714396	
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